I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SECRETARY

SIGNATURE: MARIANNE SOIN

Electronic Signature of Signing Officer/Director Detail

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000002534

Entity Name: EAST COAST HOSPITALITY COMPANY

Current Principal Place of Business:

621 CAPITOL MALL 1900 SACRAMENTO, CA 95814

Current Mailing Address:

621 CAPITOL MALL 1900 SACRAMENTO, CA 95814

FEI Number: 45-2488956

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Title

Electronic Signature of Registered Agent **Officer/Director Detail :** PTD Title VS

Name	HILL, EVA H	Name	SOIN, MARIANNE
Address	621 CAPITOL MALL SUITE 1900	Address	621 CAPITOL MALL SUITE 1900
City-State-Zip:	SACRAMENTO CA 95814	City-State-Zip:	SACRAMENTO CA 95814

Date

Certificate of Status Desired: No

01/05/2015