2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000005413

Address:

City-St-Zip:

Entity Name: WESTWARD HOSPITALITY MANAGEMENT, INC.

FILED Jul 31, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
5847 SAN SUITE 465 HOUSTON					
Current Mailing Address:			New Mailing Address:		
5847 SAN SUITE 465 HOUSTON					
FEI Number	: 20-5146628	FEI Number Applied For ()	FEI Number Not App	icable () Certificate o	f Status Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
155 OFFIC SUITE A	CORPORATE DE PLAZA DR SSEE, FL 323				
	e named entity e of Florida.	submits this statement for the	purpose of changing i	s registered office or regis	stered agent, or both,
SIGNATUI	RE: GAYLE V	VINDLE			
	Electro	nic Signature of Registered Ag	gent	Dat	e
		93(2)(b), F.S., the corporation did n	not receive the prior notic	е.	
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	MANGALJI, M	IPE, SUITE 4650	Title: Name: Address: City-St-Zip:	PTSD (X) Change () A ACHKAR, NABIL 5847 SAN FELIPE, SUITE 468 HOUSTON, TX 77057	
Title: Name: Address: City-St-Zip:	BENNETT, DR	IPE, SUITE 4650	Title: Name: Address: City-St-Zip:	VPD (X) Change () A MANGALJI, MOEZ 5847 SAN FELIPE, SUITE 468 HOUSTON, TX 77057	
Title: Name: Address: City-St-Zip:	BURRELL, JEI	IPE, SUITE 4650	Title: Name: Address: City-St-Zip:	AVP (X) Change () A HAMZEI, NAHID 5847 SAN FELIPE, SUITE 468 HOUSTON, TX 77057	
Title: Name:	() Delete	Title: Name:	AVP () Change (X) A	ddition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: MOEZ MANGALJI VP 07/31/2008

5847 SAN FELIPE, SUITE 4650

HOUSTON, TX 77057