## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# H64824

FILED Jul 03, 2006 Secretary of State

Entity Name: SUNSPOT BEVERAGE & SNACKS, INC.

**Current Principal Place of Business: New Principal Place of Business:** 215 PINEDA ST. **UNITE 149** LONGWOOD, FL 32750 **New Mailing Address: Current Mailing Address:** 4421 KILN CT BLDG C 846 BRIGHT MEADOW DR LOUISVILLE, KY 40218 LAKE MARY, FL 327464861 FEI Number: 59-2546227 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: CT CORPORATION SYSTEM GROSSMAN, JAY L 1200 S. PINE ISLAND ROAD 846 BRIGHT MEADOW DR. PLANTATION, FL 33324 LAKE MARY, FL 327464861 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: JAY L. GROSSMAN 07/03/2006 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO ( ) Delete () Change () Addition GROSSMAN, STUART M. Name: Name: 1119 CARLIMAR LANE Address: Address: City-St-Zip: LOUISVILLE, KY 40222 City-St-Zip: ( ) Delete Title: DST Title: (X) Change ( ) Addition GROSSMAN, JAY L Name: GROSSMAN, PHYLLIS R Name: 1119 CARLIMAR LANE 846 BRIGHT MEADOW DR. Address: Address: LAKE MARY, FL 32746 LOUISVILLE, KY 40222 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition GROSSMAN, ROBERT Name: Name: 1119 CARLIMAR LANE Address: Address: City-St-Zip: LOUISVILLE, KY 40222 City-St-Zip: Title: DP (X) Delete Title: () Change () Addition GROSSMAN, JAY Name: Name: Address: 846 BRIGHT MEADOW DR. Address: City-St-Zip: LAKE MARY, FL City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: JAY L.GROSSMAN DP 07/03/2006