2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
May 01, 2008
Secretary of State

DOCUMENT# N04000010217

Entity Name: 4 SEASONS OF HOLLYWOOD, INC.

Current Principal Place of Business:

5131 NORTH 37TH STREET
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

Current Mailing Address:

5131 NORTH 37TH STREET
HOLLYWOOD, FL 33021 US

New Mailing Address:

FEI Number: 20-2908089 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHUCHLA, LENORA
5131 NORTH 37TH STREET
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

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: LENORA CHUCHA

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CHUCHLA, LENORA
Address: 5131 NORTH 37TH STREET
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: T ( ) Delete
Name: SAMUELS, BRENDA
Address: 2512 SW 180TH AVENUE
City-St-Zip: MIRAMAR, FL 33029 US

Title: S ( ) Delete
Name: LAWSON, BARBARA
Address: 617 NW 10TH STREET
City-St-Zip: HALLANDALE, FL 33009 US

Title: PARL (X) Delete
Name: SANDER, WADE
Address: 1600 SOUTH PARK ROAD
City-St-Zip: HOLLYWOOD, FL 33021 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LENORA CHUCHLA PRES 05/01/2008

Electronic Signature of Signing Officer or Director — Date