

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000053674

**FILED**  
**Oct 30, 2008**  
**Secretary of State**

**Entity Name:** U.S. HOSPITALITY OF TAMPA BAY, INC.

**Current Principal Place of Business:**

3605 W HILLSBOROUGH AVE  
TAMPA, FL 33614

**New Principal Place of Business:**

**Current Mailing Address:**

3605 W. HILLSBOROUGH AVE.  
TAMPA, FL 33614

**New Mailing Address:**

3605 W HILLSBOROUGH AVE  
TAMPA, FL 33614

**FEI Number:** 59-3662595

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CADICAMO, JAMES  
3605 W. HILLSBOROUGH AVE.  
TAMPA, FL 33614 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:** JAMES CADICAMO

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:**

Title: PSTD ( ) Delete  
Name: CADICAMO, TRICIA  
Address: 84-10 152 AVE APT 2E  
City-St-Zip: HOWARD BEACH, NY 11414

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PDVP (X) Change ( ) Addition  
Name: CADICAMO, TRICIA  
Address: 84-10 152 AVE APT 2E  
City-St-Zip: HOWARD BEACH, NY 11414

Title: ST ( ) Change (X) Addition  
Name: CADICAMO, AMY ST  
Address: 3605 W. HILLSBOROUGH AVENUE  
City-St-Zip: TAMPA, FL 33614

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.

**SIGNATURE:** AMY CADICAMO

ST

10/30/2008

Electronic Signature of Signing Officer or Director

Date