

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000025099

Entity Name: ISLAND PROVISIONS, INC.

FILED
Jan 09, 2009
Secretary of State

Current Principal Place of Business:

240 N. KROME AVE.
FLORIDA CITY, FL 33034

New Principal Place of Business:

121NW 12TH ST.
FLORIDA CITY, FL 33034

Current Mailing Address:

240 N. KROME AVE.
FLORIDA CITY, FL 33034

New Mailing Address:

121 N.W. 12TH ST..
FLORIDA CITY, FL 33034

FEI Number: 65-1085455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, SCOTT
240 N. KROME AVE.
FLORIDA CITY, FL 33034 US

Name and Address of New Registered Agent:

SULLIVAN, SCOTT
121 N.W. 12TH. ST.
FLORIDA CITY, FL 33034 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: SCOTT SULLIVAN

01/09/2009

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: D () Delete
Name: SULLIVAN, SCOTT
Address: 6155 NW 99TH WAY
City-St-Zip: PARKLAND, FL 33076

Title: D () Delete
Name: SULLIVAN, FRANCES
Address: 6155 NW 99TH WAY
City-St-Zip: PARKLAND, FL 33076

Title: D () Delete
Name: HOTZ, CHARLES R
Address: 536 HAWKSBILL ISLAND DR.
City-St-Zip: SATELLITE BEACH, FL 32937

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:

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: SCOTT SULLIVAN

PRES

01/09/2009

Electronic Signature of Signing Officer or Director

Date