

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

<b>DOCUMENT # P01000052263</b> 1. Entity Name <b>SUNRISE CAFE OF VOLUSIA COUNTY, INC.</b>				<b>FILED</b> <b>07 JAN 31 AM 10:40</b> SECRETARY OF STATE TALLAHASSEE, FLORIDA <b>REINSTATEMENT</b> 06-07	
Principal Place of Business <b>779 S NOVA ROAD ORMOND BEACH, FL 32174</b>		Mailing Address <b>112 BEVERLY COURT DAYTONA BEACH, FL 32114</b>			
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address <b>3657 NEEDLES DRIVE</b>			
City & State <b>ORMOND BEACH, FL</b>		City & State <b>ORMOND BEACH, FL</b>		4. FEI Number <b>02-0534810</b>	
Zip <b>32174</b>		Country <b>USA !!</b>		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>SCHULZ, JEFF 424 BELLEVUE AVENUE DAYTONA BEACH, FL 32114</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>3657 NEEDLES DRIVE</b> City <b>ORMOND BEACH</b> <b>FL</b> Zip Code <b>32174</b>	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <b>JEFF Schulz</b> <b>1-26-07</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$300.00</b>			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P</b> <b>SCHULZ, DEBORAH</b> <b>112 BEVERLY COURT</b> <b>DAYTONA BEACH, FL 32114</b>	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>ST</b> <b>SCHULZ, JEFF</b> <b>112 BEVERLY COURT</b> <b>DAYTONA BEACH, FL 32114</b>	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			<b>100087607031</b> <b>02/07/07--01053--013 **308.75</b>		
SIGNATURE: <b>JEFF Schulz</b> <b>1-26-07</b> <b>386-673-1474</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					