

PD10000096761

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

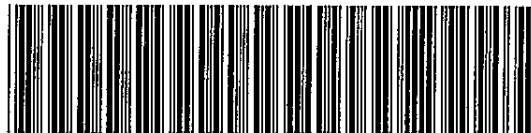
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PD1000096761
CH RILEY
6-30-03



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 3, 2003

GULFSTREAM RESTAURANT VENTURES, INC.
5300 GEORGIA AVENUE
WEST PALM BEACH, FL 33405

SUBJECT: GULFSTREAM RESTAURANT VENTURES, INC.
Ref. Number: P01000096761

Our records indicate the registered agent for the above named corporation resigned on May 30, 2003 and that the corporation currently does not have a registered agent designated.

Chapter 607, Florida Statutes, requires this office to give 60 days notice of our intent to dissolve a corporation for failure to appoint and maintain a registered agent.

This letter is our notice of intent to dissolve the above named corporation 60 days from the date of this letter if a registered agent is not properly designated.

Enclosed is registered agent designation application for you to complete and return with a filing fee of \$35.

If you should need any further information, please contact our office at (850) 245-6050.

Carol Mustain
Document Specialist
Division of Corporations

Letter number: 603A00034796

RECEIVED
03 JUN 26 AM 11:35
DIVISION OF CORPORATIONS

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : GULFSINK RESTAURANT VENTURES, INC
2. The mailing address of the corporation : 5300 GEORGIA AVE
WEST PALM BEACH, FL 33405
3. Date of incorporation/qualification: 10/4/01 Document number: P01000096761
4. The name and address of the current registered agent and registered office:

- MANUEL FARACH
1645 PALM BEACH LAKES BLVD, SUITE 1200
WEST PALM BEACH, FL 33401
5. The name and address of the new registered agent (if changed) and /or registered office (if changed).
(P.O. Box NOT Acceptable)

MIGUEL MALINA
5300 GEORGIA AVE
WEST PALM BEACH, FL 33405

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

(Signature of an officer, chairman or vice chairman of the board)

(Date)

MIGUEL MALINA VP
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

MIGUEL MALINA
(Typed or Printed Name)

VP
(Capacity)

*** FILING FEE: \$35.00 ***