2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000024541

Entity Name: SBH GROUP, INC.

FILED Nov 12, 2004 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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LUCRECIA ESPINAL 1230 N.E. 204 TERRACE

NORTH MIAMI BEACH, FL 33179 NORTH MIAMI BEACH, FL 33179

Current Mailing Address: New Mailing Address:

LUCRECIA ESPINAL 1230 N.E. 204 TERRACE

NORTH MIAMI BEACH, FL 33179 NORTH MIAMI BEACH, FL 33179

FEI Number: 01-0616296 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ESPINAL, LUCRECIA ESPINAL, LUCRECIA 1230 N.E. 204 TERR 1230 NE 204 TERR

N MIAMI BEACH, FL 33179 NORTH MIAMI BEACH, FL 33179 US 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: LUCRECIA ESPINAL 11/12/2004

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

ESPINAL, LUCRECIA ESPINAL, LUCRECIA Name: Name: 1230 NE 204 TERR 1230 N.E. 204 TERR Address: Address:

City-St-Zip: NORTH MIAMI BEACH, FL 33179 City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: Title: VΡ (X) Change () Addition () Delete Name: PAPAZOGLOU, BARBARA Name: PAPAZOGLOU, BARBARA

1282 NE 144 STREET 1282 N.E. 144 STREET Address: Address: MIAMI, FL 33161 MIAMI, FL 33161 City-St-Zip: City-St-Zip:

Title: Title: () Change (X) Addition () Delete

Name: GARCIA, DAMARIS Name: 20900 N.E. 14 AVENUE Address: Address: City-St-Zip: City-St-Zip: NORTH MIAMI BEACH, FL 33179

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Ρ SIGNATURE: DAMARIS GARCIA 11/12/2004