


FILED

03 MAY -1 PM 3:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000068897																											
1. Entity Name SOBE HOSPITALITY MANAGEMENT GROUP, INC.																											
Principal Place of Business 1414 COLLINS AVE MIAMI BCH, FL 33139		Mailing Address PO BOX 832137 MIAMI, FL 33283-2137																									
2. Principal Place of Business		3. Mailing Address 1414 COLLINS AVE																									
Suite, Apt. #, etc.		Suite, Apt. #, etc.																									
City & State		City & State MIAMI BEACH - FL																									
Zip	Country	Zip	Country																								
33139	USA	33139	USA																								
4. FEI Number 27-0020430		Applied For Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent BALLESTAS AND ASSOCIATES, INC. 7730 SW 68 TR MIAMI, FL 33143		7. Name and Address of New Registered Agent Name JUAN PABLO D'ONOFRIO Street Address (P.O. Box Number is Not Acceptable) 1414 COLLINS AVE City MIAMI BEACH FL Zip Code 33139																									
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 D'ONOFRIO, JUAN PABLO DATE APRIL 21ST, 2003 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when transferring)</small>																											
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																									
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12. I hereby certify that the information supplied with this filing does not qualify 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 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.																											
SIGNATURE: D'ONOFRIO, JUAN PABLO		DATE: APRIL 21ST, 2003 (205)-532-0043																									
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE																									



CHECK HERE IF MAKING CHANGES

CHARGE (10/02)

0.00

205/52

POWER OF ATTORNEY

KNOW ALL PERSONS BY THESE PRESENTS that I, Manuel M. Arvesu, as President of Sobe Hospitality Management Group has made, constituted, and appointed, and by these presents do make, constitute, and appoint **Juan Pablo D'Onofrio** to be my true and lawful attorney for me and in my name, place and stead, and to act on my behalf giving and granting unto my said attorney full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and about all matters relative to the above named corporation as fully, to all intents and purposes, as I might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that **Juan Pablo D'Onofrio** my said attorney or his substitute, shall lawfully do or cause to be done by virtue hereof.


IN WITNESS WHEREOF, we have hereunto set my hand and seal this 31st day of January, 2003.

Signed, sealed and delivered
in the presence of:



Witness Print Name
Maria E. Figueredo

Witness Signature



Witness Print Name
Maria Rodriguez

Witness Signature


Sobe Hospitality Group, Inc.
A Florida corporation

By: _____
Manuel M. Arvesu, President

STATE OF FLORIDA

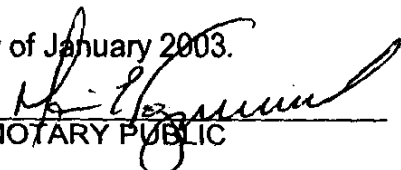
COUNTY OF MIAMI-DADE

I HEREBY CERTIFY, that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared: **Manuel M. Arvesu as President of Sobe Hospitality Group, Inc. a Florida corporation,** who is personally known to me and who did take an oath.

WITNESS my hand and official seal this 31st day of January 2003.



Maria E. Figueredo
MY COMMISSION # DD021721 EXPIRES
May 14, 2005


NOTARY PUBLIC