2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

07-17-2003 90033 010 ***150.00 P0200096866

DOCUMENT # P0200096866 1. Entity Name BLACKSTONE GRILL AND TAPAS, INC.					03 OCT 14 PM 2: 55	3 ;	
Principal Place of Business 301 GULF BLVD. INDIAN ROCKS BEACH FL 34635 Malling Address 301 GULF BLVD. MDIAN ROCKS BEACH FL					SECRETARY OF STAT		A Silla Stil (28)
Principal Place of Business 3. Malling Address							
Suite, Apt.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		☐ CHECK HERE IF N	IAKING CHANGES	.	
City & Stat	te	City & State			4. FEI Number Applied For Not Applicable		
Zip	Country	Zip	Zip Country		5. Certificate of Status Desired	\$8.75 Ad	iditional
6. Name and Address of Current Registered Agent				Name	7. Name and Address of New Regis	tered Agent	
CROWE, BOYCE D SR. 1851 SAND KEY ESTATES CT. #48				Street Address (P.O. Box Number is Not Acceptable)			
CLÉARWATER FL 33767				City		FL Zip Coo	le .
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State 9. Election Campaign Financing \$5.00 May in Trust Fund Contribution. Added to Fees							
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR	S IN 11
NAME STREET ADDRESS	P Dekte CROWE, BOYCE D SR. s 1651 SAND KEY ESTATES CT. #48 CLEARWATER FL 33767			T ADDRESS	4000239; 10/20/0301001-	□ Change 20524 012 **400	Addition
CITY-ST-ZIP	OLEANWAILN PL 35707	☐ Defete	TITLE	ST-ZIP		☐ Change	☐ Addition
NAME STREET ADDRESS CITY+ST-ZIP		_ 5000	NAME Stree	1		C. Oracigo	
TITLE NAME		☐ Delete	TITLE	J		☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP			-	T ADORESS ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		FADDRESS		Change	Addition
TITLE NAME		☐ Delete	TITLE NAME	51-ZIP		Change Change	Addition
STREET ADDRESS CITY-ST-ZIP			STREET CITY-S	TADDRESS IT-ZIP	·	~	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	. TITLE NAME STREET GITY-S	ADDRESS ST-ZIP		☐ Change	Addition
12. I hereby certify that the information supplied with this filling 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: SIGNATURE: SIGNATURE:							
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR							

Blackstone Grill and Tapas, Inc. 301 Gulf Boulevard Indian Rocks Beach, FL 34635

October 10, 2003

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32303-1500

To Whom It May Concern:

We are requesting reinstatement of the Corporation. We filed our Uniform Business Report (UBR) on July 15, 2003 with the \$150.00 filing fee and a letter requesting the late fee be waived. We did not receive the notice that an additional \$400.00 filing fee was due with our original submission. We have enclosed a check for the additional \$400.00 filing fee.

Thank you,

Boyce Crowe

President-