

**2004 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Dec 01, 2004  
Secretary of State**

DOCUMENT# P03000039839

Entity Name: BIG HORSE BEVERAGE, INC.

**Current Principal Place of Business:**

4641 9TH AVE.  
POMPANO BCH, FL 33064

**New Principal Place of Business:**

467 S. FLAGLER AVE.  
62  
POMPANO BCH, FL 33060

**Current Mailing Address:**

4641 9TH AVE.  
POMPANO BCH, FL 33064

**New Mailing Address:**

467 S. FLAGLER AVE.  
62  
POMPANO BCH, FL 33060

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

GONDRE, GUY  
5147 HERON CT.  
POMPANO BCH, FL 33074    US

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

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: \_\_\_\_\_

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:**

Title:                      PD                      ( ) Delete  
Name:                      GONDRE, GUY  
Address:                      5147 HERON CT.  
City-St-Zip:                      COCONUT CREEK, FL 33074

Title:                      VSD                      ( ) Delete  
Name:                      GERMAIN, FRED  
Address:                      4641 9TH AVE.  
City-St-Zip:                      POMPANO BCH, FL 33064

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: GUY GONDRE

PD

12/01/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date