

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED

05 JAN -3 AM 9:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



12222004 REIN-P CR2E098 (6/04)

<b>DOCUMENT # P03000085485</b> 1. Entity Name <b>BARBELL CAFE, INC.</b>					
Principal Place of Business <b>2816 N DIXIE HWY #6 WILTON MANORS, FL 33334</b>			Mailing Address <b>2816 N DIXIE HWY #6 WILTON MANORS, FL 33334</b>		
2. Principal Place of Business <b>690 NE 13 St.</b>		3. Mailing Address <b>690 NE 13 St.</b>			
Suite, Apt. #, etc. <b>Suite 104</b>		Suite, Apt. #, etc. <b>Suite 104</b>			
City & State <b>Fort Lauderdale FL</b>		City & State <b>Fort Lauderdale, FL</b>			
Zip <b>33304</b>	Country <b>USA</b>	Zip <b>33304</b>	Country <b>USA</b>	4. FEI Number <b>31-1825210</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>LAFONTAINE, MARK J 141 NW 46 COURT FT LAUDERDALE, FL 33309</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After January 1, 2005, Fee will be \$300.00</b>			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
[Empty Officer Entry]			<b>DIRECTOR Rene Endara 690 NE 13 St, Suite 104 Ft Lauderdale, FL 33304</b>		
[Empty Officer Entry]			<b>PD Gloria Endara 690 NE 13 St. Ste. 104 Ft. Lauderdale, FL 33304</b>		
[Empty Officer Entry]			[Empty Addition Entry]		
[Empty Officer Entry]			<b>400043794484 01/03/05--01014--014 **150.00</b>		
[Empty Officer Entry]			[Empty Addition Entry]		
[Empty Officer Entry]			[Empty Addition Entry]		
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: <u>Rene Endara</u> Date: <u>Dec 22, 04</u>					