

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000001493

FILED
Oct 19, 2004
Secretary of State

Entity Name: TROPICAL OASIS RESTAURANT, INC.

Current Principal Place of Business:

9015 PINES BLVD.
UNIT B
PEMBROKE PINES, FL 33434

New Principal Place of Business:

Current Mailing Address:

6225 S.W. 32ND STREET
MIRAMAR, FL 33023

New Mailing Address:

FEI Number: 20-0556235

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ESCOFFERY, MARIE
6225 S.W. 32ND STREET
MIRAMAR, FL 33023 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: P () Delete
Name: ESCOFFERY, MARIE
Address: 6225 S.W. 32ND STREET
City-St-Zip: MIRAMAR, FL 33023

Title: S () Delete
Name: ESCOFFERY, MARIE
Address: 6225 S.W. 32ND STREET
City-St-Zip: MIRAMAR, FL 33023

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: MARIE ESCOFFERY

PS

10/19/2004

Electronic Signature of Signing Officer or Director

Date