

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000098255

FILED
Jul 24, 2009
Secretary of State

Entity Name: DINO'S FLA, INC.

Current Principal Place of Business:

16 2ND ST. N.
ST. PETERSBURG, FL 33701

New Principal Place of Business:

8501 ASTRONAUT BLVD
CAPE CANAVERAL, FL 32920

Current Mailing Address:

16 2ND ST. N.
ST. PETERSBURG, FL 33701

New Mailing Address:

8501 ASTRONAUT BLVD
CAPE CANAVERAL, FL 32920

FEI Number: 61-1472893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MALOGRIDES, CRAIG D
5950 BAYVIEW CR.
GULFPORT, FL., FL 33707 US

Name and Address of New Registered Agent:

BAISDEN, LISA
8501 ASTRONAUT BLVD
CAPE CANAVERAL, FL 32920 US

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: LISA BAISDEN

07/24/2009

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: D () Delete
Name: MALOGRIDES, CRAIG D
Address: 5950 BAYVIEW CR. S.
City-St-Zip: GULFPORT, FL., FL 33707

Title: D (X) Delete
Name: BAGLEY, EDWARD
Address: 5396 GULF BLVD.
City-St-Zip: ST PETERSBURG, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BAISDEN, LISA
Address: 8501 ASTRONAUT BLVD
City-St-Zip: CAPE CANAVERAL, FL 32920

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LISA BAISDEN

CFO

07/24/2009

Electronic Signature of Signing Officer or Director

Date