2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000104020

Entity Name: STRATEGIC HOSPITALITY GROUP, CORP.

FILED Jun 08, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

5838 COLLINS AVENUE 1691 MICHIGAN AVENUE

SUITE 12E SUITE 440

MIAMI BEACH, FL 33140 US MIAMI BEACH, FL 33139 US

Current Mailing Address: New Mailing Address:

5838 COLLINS AVENUE 1691 MICHIGAN AVENUE SUITE 12E SUITE 440

SUITE 12E SUITE 440 MIAMI BEACH, FL 33140 US MIAMI BEACH, FL 33139 US

FEI Number: 20-1360334 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

JACOBS, MICHAEL B
5838 COLLINS AVENUE
SUITE 12E
MIAMI BEACH, FL 33140 US
JACOBS, MICHAEL B
1691 MICHIGAN AVENUE
SUITE 440
MIAMI BEACH, FL 33139 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: MICHAEL B. JACOBS 06/08/2009

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO () Delete Title: CEO (X) Change () Addition

Name: JACOBS, MICHAEL B Name: JACOBS, MICHAEL B
Address: 5838 COLLINS AVENUE Address: 1691 MICHIGAN AVENUE SUITE 440

City-St-Zip: MIAMI BEACH, FL 33140 US City-St-Zip: MIAMI BEACH, FL 33139 US

Title: P () Delete Title: PRES (X) Change () Addition Name: HAGASHI, CHRIS Name: ROTHCHILD, ANDREW M

Address: 5838 COLLINS AVENUE Address: 1691 MICHIGAN AVENUE SUITE 440 City-St-Zip: MIAMI BEACH, FL 33140 US City-St-Zip: MIAMI BEACH, FL 33139 US

Title: () Delete Title: VP () Change (X) Addition

Name: Name: HAYASHI, CHRIS

Address: Address: 1691 MICHIGAN AVENUE SUITE 440

City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33139

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: MICHAEL B. JACOBS CEO 06/08/2009