2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000126898

Entity Name: URBAN HOSPITALITY VENTURES, INC.

FILED Nov 11, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

39 WEST PARK AVENUE LAKE WALES, FL 33853

Current Mailing Address: New Mailing Address:

622 OLYMPIC DRIVE 2349 LAKE DEBRA DRIVE #617 OCOEE, FL 34761 ORLANDO, FL 32835

FEI Number: 27-0100595 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TRAWICK, JOYE R
622 OLYMPIC DRIVE
0COEE, FL 34761 US

TRAWICK, JOYE R
2349 LAKE DEBRA DRIVE #617
ORLANDO, FL 32835 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: JOYE R. TRAWICK 11/11/2008

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: () Delete Title: (X) Change () Addition DE COSEY, ROBERT D DE COSEY, ROBERT D Name: Name: 622 OLYMPIC DRIVE 2349 LAKE DEBRA DRIVE #617 Address: Address: City-St-Zip: OCOEE, FL 34761 City-St-Zip: ORLANDO, FL 32835

Title: VPD () Delete Title: VPD (X) Change () Addition Name: TRAWICK, JOYE R Name: TRAWICK, JOYE R

Address: 622 OLYMPIC DRIVE Address: 2349 LAKE DEBRA DRIVE #617

City-St-Zip: OCOEE, FL 34761 City-St-Zip: ORLANDO, FL 32835

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: ROBERT D. DE COSEY PD 11/11/2008