2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Aug 10, 2009
Secretary of State

DOCUMENT# P05000095075

Entity Name: TROPICAL EXTRAVAGENZA INC.

Current Principal Place of Business:

18751 WEST DIXIE HWAY
SUITE #287
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

18751 WEST DIXIE HWAY
SUITE #287
AVENTURA, FL 33180

New Mailing Address:

6051 PALM TRACE LNDG
SUITE #101
DAVIE, FL 33314

FEI Number: 20-3105849 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOZDE, IDIL
6051 PALM TRACE LNDG
103
DAVIE, FL 33314 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: IDIL GOZDE

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: PRES ( ) Delete
Name: DALEY, HULYA
Address: 6051 PALM TRACE LANDING
City-St-Zip: DAVIE, FL 33314

Title: VP ( ) Delete
Name: GOZDE, IDIL
Address: 6051 PALM TRACE LANDING
City-St-Zip: DAVIE, FL 33314

Title: TRES ( ) Delete
Name: GOZDE, IDIL
Address: 6051 PALM TRACE LANDING
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: DALEY, HULYA
Address: 6051 PALM TRACE LANDING, #101
City-St-Zip: DAVIE, FL 33314

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 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: HULYA DALEY PRES 08/10/2009

Electronic Signature of Signing Officer or Director — Date