2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000010287

Entity Name: TROPHY PROPERTIES SOUTH FLORIDA, INC.

FILED Sep 28, 2007 Secretary of State

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

2400 E LAS OLAS BLVD 401 E LAS OLAS BLVD SUITE H352 SUITE 130-349

FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33301

Current Mailing Address: New Mailing Address:

2400 E LAS OLAS BLVD 401 E LAS OLAS BLVD SUITE H352 SUITE 130-349

FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33301

FEI Number: 65-1265949 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:

HAINES, DEBORAH D
2400 E LAS OLAS BLVD
SUITE H352
SUITE 130-349
HAINES, DEBORAH D
401 E LAS OLAS BLVD
SUITE 130-349

FORT LAUDERDALE, FL 33301 US FORT LAUDERDALE, FL 33301 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: DEBORAH HAINES 09/28/2007

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

Name: HAINES, DEBORAH D

Address: 400 F LAS OLAS BLVD 1353

Address: 2400 E LAS OLAS BLVD, H352 Address: 401 E LAS OLAS BLVD, 130-349 City-St-Zip: FORT LAUDERDALE,, FL 33301 City-St-Zip: FORT LAUDERDALE,, FL 33301

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: DEBORAH HAINES P 09/28/2007