

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000073249

Entity Name: LITTLE TROPIC RESTAURANT, INC.

FILED
Sep 29, 2009
Secretary of State

Current Principal Place of Business:

2027 NORTH DIXIE HWY
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

2027 NORTH DIXIE HWY
POMPANO BEACH, FL 33060

New Mailing Address:

2027 N DIXIE HWY
POMPANO BEACH, FL 33060

FEI Number: 20-4940138

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HILAIRE, CARLA
5460 N STATE RD 7
108
FORT LAUDERDALE, FL 33319 US

Name and Address of New Registered Agent:

MEHU, GENICIA
851, NE 50TH CT
POMPANO BEACH, FL 33064 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: GENICIA MEHU

09/29/2009

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: P () Delete
Name: DELVA HILAIRE, NANCY
Address: 2027 NORTH DIXIE HWY
City-St-Zip: POMPANO BEACH, FL 33060

Title: VP () Delete
Name: HILAIRE, CARLA
Address: 2027 NORTH DIXIE HWY
City-St-Zip: POMPANO BEACH, FL 33060

Title: TREA () Delete
Name: DAZILE, SERGE
Address: 5460 NORTH STATE RD 7
City-St-Zip: FORT LAUDERDALE, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MEHU, GENICIA
Address: 851, NE 50TH CT
City-St-Zip: POMPANO BEACH, FL 33064

Title: VP (X) Change () Addition
Name: ABRAHAM, ADMISE
Address: 2027 N DIXIE HWY
City-St-Zip: POMPANO BEACH, FL 33060

Title: TREA (X) Change () Addition
Name: MEHU, JEAN
Address: 851, NE 50TH CT
City-St-Zip: POMPANO BEACH, FL 33064

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: GENICIA MEHU

PRES

09/29/2009

Electronic Signature of Signing Officer or Director

Date