

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

**FILED**  
**Mar 31, 2008**  
**Secretary of State**

DOCUMENT# P06000142961

**Entity Name:** SUNBIZ HOSPITALITY, INC.

**Current Principal Place of Business:**

10148 NEW BERLIN RD  
JACKSONVILLE, FL 32226

**New Principal Place of Business:**

**Current Mailing Address:**

10148 NEW BERLIN RD  
JACKSONVILLE, FL 32226

**New Mailing Address:**

PO BOX 20790  
EL SOBRANTE, CA 94820

FEI Number: 20-5489671

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

HUNDAL, TJ  
10148 NEW BERLIN RD  
JACKSONVILLE, FL 32226 US

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

GILL, GURPREET  
10148 NEW BERLIN RD  
JACKSONVILLE, FL 32226 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: GURPREET GILL

03/31/2008

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:**

Title: P ( ) Delete  
Name: GILL, GURPREET  
Address: 10148 NEW BERLIN RD  
City-St-Zip: JACKSONVILLE, FL 32226

Title: C ( ) Delete  
Name: DHILLON, RUPINDER  
Address: 10148 NEW BERLIN RD  
City-St-Zip: JACKSONVILLE, FL 32226

Title: D ( ) Delete  
Name: HUNDAL, TJ  
Address: 10148 NEW BERLIN RD  
City-St-Zip: JACKSONVILLE, FL 32226

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: GILL, GURPREET  
Address: PO BOX 20790  
City-St-Zip: ELSOBRANTE, CA 94820

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: GURPREET GILL

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03/31/2008

Electronic Signature of Signing Officer or Director

Date