## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P06000148888

FILED Jun 05, 2008 Secretary of State

Entity Name: ANTHONY'S CATERING AND CONSULTING MANAGEMENT GROUP, INC.

**Current Principal Place of Business: New Principal Place of Business:** 11753 S. ORANGE BLOSSOM TRAIL 11753 S. ORANGE BLOSSOM TRAIL ORLANDO, FL 32837 SUITE D ORLANDO, FL 32837 **Current Mailing Address: New Mailing Address:** 11753 S. ORANGE BLOSSOM TRAIL 11753 S. ORANGE BLOSSOM TRAIL ORLANDO, FL 32837 SUITE D ORLANDO, FL 32837 FEI Number: 59-3717350 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COBB, MELISSA 19318 BOB-O-LINK DR. MIAMI, FL 33015 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: MELISSA COBB 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 FOTHERGILL, ANTHONY Name: Name: FOTHERGILL, ANTHONY L 676 CRESTING OAK CIRCLE 1984 WINDCREST LAKE CIRCLE Address: Address: City-St-Zip: ORLANDO, FL 32824 City-St-Zip: ORLANDO, FL 32824 US Title: () Delete Title: ADIR ( ) Change (X) Addition FOTHERGILL, ANGELA M Name: Name: 1984 WINDCREST LAKE CIRCLE Address: Address: ORLANDO, FL 32824 US City-St-Zip: City-St-Zip: Title: ( ) Delete Title: ADIR ( ) Change (X) Addition FOTHERGILL, IAN W Name: Name: 11753 ORANGE BLOSSOM TRAIL SUITE D Address Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32837 US

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: ANTHONY FOTHERGILL DIRE 06/05/2008