

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000076507

FILED
Nov 12, 2008
Secretary of State

Entity Name: JERRY'S CASUAL PATIO OF DAVIE, INC.

Current Principal Place of Business:

3400 SOUTH UNIVERSITY DRIVE
DAVIE, FL 33328 US

New Principal Place of Business:

7080 STATE ROAD 84
SUITE 5
DAVIE, FL 33317 US

Current Mailing Address:

3974 OKEECHOBEE BLVD.
WEST PALM BEACH, FL 33409 US

New Mailing Address:

7080 STATE ROAD 84
SUITE 5
DAVIE, FL 33317 US

FEI Number: 26-0462523

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RINE, JAMES
3400 SOUTH UNIVERSITY DRIVE
DAVIE, FL 33328 US

Name and Address of New Registered Agent:

RINE, JAMES
7080 STATE ROAD 84
SUITE 5
DAVIE, FL 33317 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: JAMES RINE

11/12/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RINE, JAMES
Address: 3400 SOUTH UNIVERSITY DRIVE
City-St-Zip: DAVIE, FL 33328 US

Title: VP () Delete
Name: BANNON, FRANK
Address: 3400 SOUTH UNIVERSITY DRIVE
City-St-Zip: DAVIE, FL 33328 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RINE, JAMES
Address: 7080 STATE ROAD 84, SUITE 5
City-St-Zip: DAVIE, FL 33317 US

Title: VP (X) Change () Addition
Name: RINE, JAMES
Address: 7080 STATE ROAD 84, SUITE 5
City-St-Zip: DAVIE, FL 33317 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: JAMES RINE

P

11/12/2008

Electronic Signature of Signing Officer or Director

Date