2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000111087

Entity Name: SPORTS MASSAGE CAFE, INC.

FILED Oct 11, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

1844 NORTH NOB HILL, SUITE #191 7541 NW 16TH STREET #1210

PLANTATION, FL 33322 PLANTATION, FL 33313

Current Mailing Address: New Mailing Address:

1844 NORTH NOB HILL, SUITE #191 7541 NW 16TH STREET #1210 PLANTATION, FL 33313 PLANTATION, FL 33322

FEI Number: 26-1282672 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:

DOMINGUEZ, CLAUDIA LMT DOMINGUEZ, CLAUDIA LMT 7541 NW 16TH STREET #1210 1844 NORTH NOB HILL, SUITE #191 PLANTATION, FL 33322 PLANTATION, FL 33313 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: CLAUDIA DOMINGUEZ 10/11/2008

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

DOMINGUEZ, CLAUDIA DOMINGUEZ, CLAUDIA Name: Name: 1844 NORTH NOB HILL, SUITE #191 Address: 7541 NW 16TH STREET #1210 Address:

PLANTATION, FL 33313 City-St-Zip: PLANTATION, FL 33322 City-St-Zip:

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

DOMINGUEZ, CLAUDIA Name: GUARACINO, JOSEPH Name: 1844 NORTH NOB HILL, SUITE #191 Address: 7541 NW 16TH STREET #1210 Address: City-St-Zip: PLANTATION, FL 33322 PLANTATION, FL 33313 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: CLAUDIA DOMINGUEZ, LMT **PVTS** 10/11/2008