2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000000662

Entity Name: ISLAND GRILL CAFE INC.

FILED Oct 05, 2009 Secretary of State

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

193 N. STATE RD 7 193 N. STATE RD 7 MARIGATE, 33076 MARIGATE, FL 33076

Current Mailing Address: New Mailing Address:

5067 NW 120TH AVE 5067 NW 120TH AVE

CORAL SPRINGS, 33076 CORAL SPRINGS, FL 33076

FEI Number: 26-1670440 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SINCLAIR, JAANA K 5067 NW 120TH AVE

CORAL SPRINGS, FL 33076 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: JAANA SINCLAIR

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

SINCLAIR, LISA A SINCLAIR, LISA A Name: Name: 5067 NW 120 AVE 5067 NW 120 AVE Address: Address:

City-St-Zip: CORAL SPRINGS, FL 33076 City-St-Zip: CORAL SPRINGS, FL 33076 US

Title: Title: SEC () Delete (X) Change () Addition Name: SINCLAIR, JAANA K Name: SINCLAIR, JAANA K

4120 NW *8TH AVE 4120 NW *8TH AVE Address: Address: CORAL SPRINGS, FL 33065 CORAL SPRINGS, FL 33065 US City-St-Zip: City-St-Zip:

Title: Title:

() Delete () Change (X) Addition Name: HARRY, SINCLAIR G Name: 193 N. STATE RD 7 Address: Address: City-St-Zip: City-St-Zip: MARGATE, FL 33063 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: LISA SINCLAIR **PRES** 10/05/2009