

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000043582

FILED
Oct 28, 2008
Secretary of State

Entity Name: BAHAMIAN CONNECTION RESTAURANT GROUP, INC.

Current Principal Place of Business:

4490 N.W. SECOND AVENUE
MIAMI, FL 33127

New Principal Place of Business:

4490 NW 2ND AVE
MIAMI, FL 33127

Current Mailing Address:

P.O. BOX 370671
MIAMI, FL 33127

New Mailing Address:

4490 NW 2ND AVE
MIAMI, FL 33127

FEI Number: 65-0847137

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

INGRAHAM, ANDREW
3520 W. BROWARD BLVD
STE 218B
FORT LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

INGRAHAM, PHILIP
3520 W. BROWARD BLVD
STE 218B
FORT LAUDERDALE, FL 33312 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: PHILIP INGRAHAM

10/28/2008

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: VD () Delete
Name: INGRAHAM, PHILIP
Address: P.O. BOX 370671
City-St-Zip: MIAMI, FL 33127

Title: TD () Delete
Name: SINGH, DIANE
Address: 5800 MARGATE BLVD., BLDG 3, APT. 345
City-St-Zip: MARGATE, FL 33063

Title: SD () Delete
Name: INGRAHAM, RICHARD
Address: 511 N.E. 40TH STREET
City-St-Zip: POMPANO BEACH, FL 33064

Title: PD () Delete
Name: INGRAHAM, ANDREW
Address: 3520 W. BROWARD BLVD., #218B
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: DIR () Delete
Name: SAMPSON, DEBORAH
Address: 5800 MARGATE BLVD., BLDG 3, APT 345
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PHILIP INGRAHAM

VD

10/28/2008

Electronic Signature of Signing Officer or Director

Date