

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P98000060601

**Entity Name:** TAMPA CONCESSIONS, INC.

**FILED**  
**Nov 03, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

303 SOUTH MELVILLE AVENUE  
TAMPA, FL 33606

**New Principal Place of Business:**

920 WEEDON DR N.E.  
ST. PETERSBURG, FL 33702

**Current Mailing Address:**

303 SOUTH MELVILLE AVENUE  
TAMPA, FL 33606

**New Mailing Address:**

920 WEEDON DR N.E.  
ST. PETERSBURG, FL 33702

**FEI Number:** 58-2402695

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCOTT, CHRISTOPHER  
303 SOUTH MELVILLE AVENUE  
TAMPA, FL 33606 US

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

SCOTT, CHRISTOPHER  
371 CHANNELSIDE WALK WAY  
UNIT 702  
TAMPA, FL 33602 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: CHRISTOPHER SCOTT

11/03/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SCOTT, CHRISTOPHER  
Address: 371 CHANNELSIDE WALK WAY, UNIT 702  
City-St-Zip: TAMPA, FL 33602

Title: V  
Name: HANNOUCHE, PETER  
Address: 920 WEEDON DR N.E.  
City-St-Zip: ST PETERSBURG, FL 33702

I hereby 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 all other like empowered.

SIGNATURE: PETER HANNOUCHE

V

11/03/2014

Electronic Signature of Signing Officer or Director

Date