FILED
05 DEC 20 AM 10:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # V43320

1. Entity Name
CLUBSYSTEMS HOLDINGS, INC.

Principal Place of Business	Mailing Address
101 GREENWOOD AVE. STE 420 JENKINTOWN, PA 19046 US	101 GREENWOOD AVE. STE 420 JENKINTOWN, PA 19046 US
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

12062005 REIN-P CR2E058 (8/04)

4. FEI Number: 65-0339289 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301	Name: CT Corporation System Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road City: Plantation FL Zip Code: 33324

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [signature] CONNIE BRYAN SPECIAL ASSISTANT SECRETARY December 20, 2005

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Date

FILE NOW!!! FEE IS $750.00
After January 1, 2006, Fee will be $800.00

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSTD SYMONS, BARRY 20 ADELAIDE STREET EAST TORONTO,ONT.,CAN M5C 2T6.	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSTD Symons, Barry 101 Greenwood Ave., Ste. 420 Jenkintown, PA 19046	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

REINSTATEMENT

2005

12/21

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] Barry Symons 20/12/05 416-861-0650

Signature and typed or printed name of signing officer or director — Date — Daytime Phone #

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Florida Department of State

Division of Corporations
Public Access System

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Fax Number : (850)878-5926

Attn: Andy, corrections been made. Pls. Keep filing date 12-20-05 Thank you. Dewi

CORPORATION REINSTATEMENT

CLUBSYSTEMS HOLDINGS, INC.

Certificate of Status	0
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