

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P00000084394

1. Corporation Name

ROARING TOYZ, INC.

2. Principal Office Address

2594 12TH STREET

Suite, Apt. #, etc.

UNIT B

City & State

SARASOTA, FL

Zip

34237

Country

USA

3. Mailing Office Address

5777 BENEVA ROAD SOUTH

Suite, Apt. #, etc.

City & State

SARASOTA, FL

Zip

34233

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

09/07/2000

5. FEI Number

65-0978301

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

**\$8.75 Additional Fee required
for a Certificate of Status**

7. Name and Address of Current Registered Agent

Name

DANIEL L. PREWETT

Street Address (P.O. Box Number is Not Acceptable)

5777 BENEVA ROAD SOUTH

Suite, Apt. #, Etc.

City

SARASOTA

State
FL

Zip Code

34233

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Date

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/S/T/D	ROBERT J. FISHER	5909 RAVENWOOD DR.	SARASOTA, FL 34243

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Robert Fisher
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT J. FISHER

10/15/02

Date

941-650-9955

Daytime Phone #

FILED

02 OCT 21 AM 10:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****150.00 ****150.00

CR2E081 (9/01)

9x 10/22/02

ROARING TOYZ, INC.
2594 12TH ST., UNIT B
SARASOTA, FL 34237

October 15, 2002

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Roaring Toyz, Inc.
P00000084394

Dear Sir or Madam,

Please find the enclosed Annual Report for the above-referenced corporation. Our mailman continually delivered our mail to different units in this building and we never received the renewal notice for tax year 2002. We have since changed our mailing address to that of our registered agent to prevent this occurrence in the future.

Our accountant brought the administrative dissolution of our corporation to our attention while he was performing an audit on our records. There was no intentional disregard for our responsibility to file. Therefore, we respectfully request an abatement of all penalties and reinstatement of our corporation.

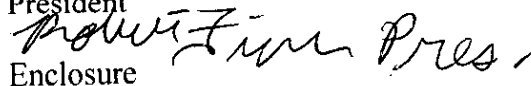
Thank you for your assistance in this matter. If you have any questions or concerns, please do not hesitate to call me.

Best regards,



Robert J. Fisher

President


Enclosure