PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
02 OCT 21 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # P00000084394

1. Corporation Name
ROARING TOYZ, INC.

2. Principal Office Address	**3.** Mailing Office Address
2594 12TH STREET	5777 BENEVA ROAD SOUTH
Suite, Apt. #, etc.: UNIT B	Suite, Apt. #, etc.:
City & State: SARASOTA, FL	City & State: SARASOTA, FL
Zip: 34237 Country: USA	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

CR2E061 (9/01)

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 ROBERT J. FISHER 10/15/02 941-650-9955

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

jr 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
Robert Fisher Pres.
Enclosure