PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	03 MAR - 7 PM 1: 56 SECRETARY OF STATE TALLAHASSEE, FLORIDA
DOCUMENT # P0100109322 1. Corporation Name Florida Toy Traders, Inc.		
. O.C.D. (IO 9		
2. Principal Office Address 1912 N.W. 67th Place	3. Mailing Office Address SAME	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. Date Incorporated or Qualified To Do Business in Florida
City & State CAINESVILLE FL Zip Country	City & State Zip Country	5. FEI Number Applied For Not Applicable
32653 USA	Zip County	CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent Name		
JAMES G., Tamborello Street Address (P.O. Box Number is Not Acceptable) 637 Winnson Square # 600013634276 03/06/03-01067-004 **151.00 Suite, Apt. #, Etc. #101 City NAPLES FL 34104		
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 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 Street Address of Each City (Class 47):		
Titles Officers and/or Directors Alex Reece	Officer and/or Director	
		600013634276 03/06/03-01067-005 **150.00
10. I certify that I am an officer or director or the reperper or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissillution 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 individual firsted 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: SIGNATURE AND TYPED OR BRINTED NAME OF SIGNING OFFICER OR DIRECTOR 3 5 0 3 352-375-8557 Daylime Phone #		

Jameson Advisory & Capital, LLC

1105 Partridge Circle
Suite 102
Naples, FL 34104
(239) 340-1498 Office (239)-304-2240 Fax

March 5, 2003

Department of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

Corporation Reinstatement Division:

According to the many Florida fees and requirements. One of these stipulations happens to be a \$150.00 Uniform Business Report, required to pay and file yearly. My client, **FLORIDA TOY TRADERS, INC.** (**FEIN 80-0003210**) an 1120-S was under the impression that his prior account had taken care of this matter. Unfortunately, this process was overlooked or just simply disregarded by the individual handling the account previously. We petition for a "penalty Abatement Request" encompassing the fiscal year 2002. My client conducted his corporation in good faith and not out of a deliberate attempt to cheat or neglect the Florida Business requirements. Therefore, we have enclosed \$150.00 with a Corporation Reinstatement Form and we are also filing the 2003 Uniform Business Report Form with another \$150.00 concurrently. Your cooperation in this matter is greatly appreciated. If you have any questions of concerns please contact myself of Mr. Alex Reece.

Sincerely,

James G. Famborello

Jameson Advisory & Capital, LLC 239-340-1498

Alexander D. Reece

Florida Toy Traders, Inc. 1912 N.W. 67th Place Gainesville, FL 32653

Phone: 352-375-8557