

1052

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 JUN -2 AM 11:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P 01000 119952

1. Corporation Name

Book Treasures & Cafe, Inc.

2. Principal Office Address

7616 University Blvd.
Suite, Apt. #, etc.

3. Mailing Office Address

same
Suite, Apt. #, etc.

City & State

Winter Park, FL

City & State

Zip

Country

32792 USA

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

12/19/2001

5. FEI Number

010550124

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

Cathy L. Spooone

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

7616 University Blvd.

400055988144

06/10/05--01002--005 **\$80.00

Suite, Apt. #, Etc.

City

Winter Park, FL

State

FL

Zip Code

32792

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

Cathy Spooone
REGISTERED AGENT MUST SIGN

Date 5-13-05

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
Pres.	Cathy Spooone	10332 Yorkmere Ct, Orlando	Orlando, FL 32817
V.P.	Gregg Buckingham	10332 Yorkmere Ct.	Orlando, FL 32817

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:

Cathy Spooone
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Cathy Spooone

Date

5-13-05

Daytime Phone #

407-677-9092

CR2E081 (01/05)

May 31, 2005

Cathy Spooone
Book Treasures & Café, Inc.
7616 University Blvd.
Winter Park, FL 32792

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

Dear Sir/Madame,

Enclosed you will find my application for a Corporation Reinstatement and a check for \$600. I would like to request a waiver of the reinstatement fee. Due to a mix-up in my address, I never received notification that I needed to file a 2002 corporation annual report form. Thank you for your attention to this matter.

Sincerely,



Cathy Spooone
President
Book Treasures & Café, Inc.