2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # PO50000 18127 1. Entity Name Mimi's Things Too, Inc. FILED 00 NOV 22 PH 12: 47 Principal Place of Business Mailing Address 1341-B 13th Ave. S. Ste 100 Same SECRETARY OF STATE TALEAHASSEE, FLORIDA. Jacksonville Beach, FL 32250 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State Not Applicable Country \$8.75 Additional Country Zip 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Patricia L. Hughes 24 La Vista Drive Street Address (P.O. Box Number Is Not Acceptable) Ponte Vedra Beach, FL 32082 Zip Code entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named SIGNATURE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 900003496FCTPVS-DAMEN President TITLE ☐ Delete TITLE Patricia L. Hughes 24 La Vista Drive NAME -12/12/00--01034--003 NAME STREET ADDRESS STREET ADDRESS ****150.00 ****150.00 Ponte Vedra Beach. FL 32082 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 expolemental 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 11 or Block 12 if changed, or on an attachment with an afforcess, with all other like appropried.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Detete

Date Da

Daytime Phone #

CR2E034 (9/99)

November 20, 2000

Natural Life Collections, Inc. 1361-B 13th Avenue S. Suite 100 Jacksonville Beach, FL 32250

Florida Department of State Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Sirs:

I am writing regarding our recent administrative dissolution due to failure to file an annual Uniform Business Report for 2000. We did not receive this report in the mail prior to its due date and did not realize it had not been filed until our recent correspondence with the Florida Department of Labor.

Enclosed are the 2000 Uniform Business Report and the filing fee of \$150.00. Please accept this report and filing fee for the year 2000 and restore our corporation to active status as soon as possible.

We have had an unexpected surge in our sales volume this year and have been busy with filling the additional orders. The annual report was not filed on time due to an oversight, not an intentional disregard for the filing requirements.

Please change our mailing address to the above return address and mail our 2001 annual report to this new address. We will make sure this report is filed on time.

Please contact us if we can provide any further information regarding this matter.

Sincerely,

Patricia L. Hughes, President

PLH:csf

Enclosures