1 of 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 JUL -6 P 2:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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07/21/05--01025--003 **450.00

REINSTATEMENT 03-05 WOP

DOCUMENT # P95000083408

1. Corporation Name
PROMOTIONAL PREMIUMS INC.

2. Principal Office Address	3. Mailing Office Address
22833 COLLERIDGE DR	SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: LAND O'LAKES, FL	City & State
Zip: 34639 Country: PASCO	Zip Country

4. Date Incorporated or Qualified To Do Business in Florida: 10/31/05

5. FEI Number: 650605499 ☐ 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: FRED BROWNING

Street Address (P.O. Box Number is Not Acceptable): 22833 COLLERIDGE DR

Suite, Apt. #, Etc.

City: LAND O'LAKES | State: FL | Zip Code: 34639

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: [signature] REGISTERED AGENT MUST SIGN Date: 7/6/05

CR2E081 (01/05)

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
P	FRED BROWNING	22833 COLLERIDGE DR.	LAND O'LAKES, FL 34639

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: [signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 7/6/05 — Daytime Phone #: 813 929-0604

Promotional Premiums Incorporated
PPI

Specialty Items * Graphic Services * Embroidery
Silk Screening * Incentive Programs
Event Management

July 6, 2005

Dept. of State
Division of Corporations
409 East Gaines St..
Tallahassee, FL 32399

Re: Doc # p95000083408

Dear Sirs:

It has been brought to my attention that my corporation – Promotional Premiums Inc. is listed as inactive. Per my conversation with an examiner and explanation of what has transpired during that time, it was suggested that I write a letter requesting a waiver and explanation.

Promotional Premiums Inc. has moved 2 times since December of 2002 to the following addresses:

1719 Magdalene Manor Dr., Tampa, FL 33613(6-8months) and
22833 Collridge Dr. Land O'Lakes, FL 34639.

During those two moves, the USPS either did not deliver or returned PPI mail. This was after many changes of address filings to try to get PPI mail delivered. I am certain that my address currently on file on (Azalea Ridge) and resident who resides there received PPI mail and did not forward or threw it away. As of this date, I have not received anything from the Dept of State.

If you need further documentation regarding the change in address to support above, I would be more than happy to provide. Should you have any questions or need for information, please feel free to give a call.

Sincerely,

Fred Browning
President