

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

06 SEP 28 PM 12:42

DOCUMENT # J20031

1. Corporation Name  
HEAVENLY HELPER TOYS, INC.

2. Principal Office Address

1542 Yancey St.  
Suite, Apt. #, etc.  
-

3. Mailing Office Address

1542 Yancey St.  
Suite, Apt. #, etc.  
-

CR2E081 (12/05)

City & State

Tallahassee, FL

City & State

Tallahassee, FL

Zip

32303

Country

Leon

Zip

32303

Country

Leon

4. Date Incorporated or Qualified  
To Do Business in Florida

6/19/1986

5. FEI Number

59-2787603

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

Diane Torrey

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

1542 Yancey Street

Suite, Apt. #, Etc.

City

Tallahassee

500080233145

09/27/06--01059--014 \*\*30 13.75

State

FL

Zip Code

32303

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

Diane Torrey  
REGISTERED AGENT MUST SIGN

Date 9/20/06

**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
DRST	Diane Torrey	1542 Yancey Street	Tallahassee, FL 32303
P			
S			

REINSTATEMENT 89-06

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 contained in Chapter 119, 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:

Diane Torrey  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

9/20/06 305-519-1228

Daytime Phone #

# EDWARDS ANGELL PALMER & DODGE LLP

• One North Clematis Street / Suite 400 West Palm Beach, FL 33401 561.833.7700 fax 561.655.8719 eapdlaw.com

**Rebecca Fortuna Black**  
Direct Dial: (561) 820-0260  
Direct Fax: (888) 325-9197  
E-Mail: rfbblack@eapdlaw.com

## **FEDEX**

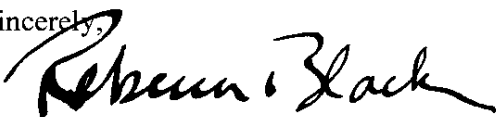
September 25, 2006

Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee FL 32301

Dear Sir or Madam:

Enclosed is a completed Corporation Reinstatement form for Heavenly Helper Toys, Inc., together with a check in the amount of \$3,033.75, representing the reinstatement fee and past due annual report fees.

Sincerely,



Rebecca Fortuna Black, CLAS  
Corporate Paralegal

cc: Leslie J. Croland, Esq.