PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
**Katherine Harris**
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

99 NOV 24 PM 12:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L45318

1. Corporation Name

**KID KAM, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| 11610 S CLEVELAND<br>FT MYER FL 33907<br>US | 11610 S CLEVELAND<br>FT MYER FL 33907<br>US |

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

| 2. New Principal Office Address, If Applicable | | 3. New Mailing Office Address, If Applicable | |
|---|---|---|---|
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

4. Date Incorporated or Qualified To Do Business in Florida: 01/25/1990

5. FEI Number: 65-0189535 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| 1 Title(s) | 2 Name of Officers and/or Directors | 3 Street Address of Each Officer and/or Director | 4 City / State / Zip |
|---|---|---|---|
| P | MILLER, RAYMOND C. | 5376 COLONY CT | CAPE CORAL FL 33904 |
| VS | MILLER, CAROL | 5376 COLONY CT | CAPE CORAL FL 33904 |
| | | | |
| | | | |
| | | | |
| | | | |

400003060964--4.
-12/06/99--01009--019
****150.00 ****150.00

| 8. Name and Address of Current Registered Agent | 9. Name and Address of New Registered Agent |
|---|---|
| MILLER, CAROL<br>11610 S CLEVELAND<br>FT MYER FL 33907 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>Suite, Apt. #, etc.<br>City / State: FL / Zip Code |

CR2E040 (8/99)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Carol Miller — Date: 11-12-99
REGISTERED AGENT MUST SIGN

11. 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: Carol Miller — 11-12-99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

D07B943 AF

This is off the computer

7/02/99

**PLAYMATES PRESCHOOL**
**Vendor QuickReport**
**January through December 1999**

| Type | Date | Num | Memo | Account | Clr | Split | Amount |
|---|---|---|---|---|---|---|---|
| Dept. of State Check | 4/14/1999 | 8998 | | Sun Trust, Playmate... | | corp.license | -150.00 |

Called 850-9000
they told me to call 850 6056
the " " " " 850 6059
" " " write!

Sent 7-2-99

Mitchell Willis

**To whom,**
**I received this letter that I had not paid my annual report. Yes I did with all my other taxes on April 14th , I have done this for 10 years. I pulled this from my computer to see the check number and date and amount .**
**1. I can cancel my check that I have already sent to you and write another or**
**2. wait and see if it all find it.**
**I will be out of my office until July 19th, can someone please call me and let me know if it was found or what I should do.**
**Thank you,**

150
484 6056

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