

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 DEC -1 AM 11:49

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # L91227

1. Corporation Name

DREAM WORLD MANAGEMENT, INC.

Principal Place of Business

1311 SW FIRST CT  
POMPANO BEACH FL 33069

Mailing Address

1311 SW FIRST CT  
POMPANO BEACH FL 33069

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

07/02/1990

5. FEI Number

59-2755355

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)

Title(s)

1

2

Name of Officers  
and/or Directors

Street Address of Each  
Officer and/or Director

3

City / State / Zip

4

P

FOSTER, BRENDA

~~5282 NE 6TH AVE., APT 23-G~~

~~FT. LAUDERDALE FL 33334~~

P

Foster, Brenda

~~5326 NE 6 Ave 23-G~~

~~oakland PK Fl 33334~~

900024761679

11/17/03--01093--014 \*\*150.00

8. Name and Address of Current Registered Agent

FOSTER, BRENDA

~~5263 NE 6TH AVE~~

~~APT-23-G~~

FT. LAUDERDALE FL 33334

9. Name and Address of New Registered Agent

Name

BRENDA FOSTER

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

~~5326 NE 6 Ave~~

Suite, Apt. #, Etc.

~~23-G~~

City

Oakland Park

State

FL

Zip Code

33334

I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of  
Registered Agent

Brenda Foster Pres

Date

11-14-03

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:

Brenda Foster

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Pres, 954  
11-14-03 781-8071

Daytime Phone #

Brenda Foster c/o  
MATTRESS CITY  
1311 SW 1st CT  
POMPANO BCH FLA  
33069 954 781 8071

11/14/03

Dear Sirs:

Dream World Management Inc,  
is a 13 yr Old Corp. I am the  
registered agent (Brenda Foster)  
and was shocked to receive  
a certificate of Administrative  
Dissolution. However I never  
received an Annual Corp. Report  
form. Then I realized that  
the state has my address  
wrong. Correct address is:

Brenda Foster  
5326 NE 6 Ave  
APT 23-G  
Oakland Park  
Fla. 33334

Please correct  
my address  
so I can receive  
all future  
forms.

Thank you,

Brenda Foster Pres