

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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| CORPORATION REINSTATEMENT |  | FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS |
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FILED
07 Dec 3 AM 10:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N01000003225

1. Corporation Name

OLIVIYA BAKER'S ACADEMY CORP

900112949249
12/07/07--01043--014 **375.25
REINSTATEMENT 02-07

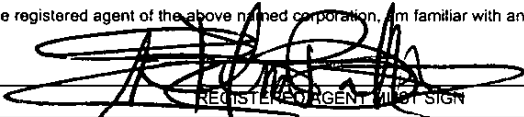
CR2E081 (1/07)

| | | | |
|--|---------|--|---------|
| 2. Principal Office Address - No P.O. Box # 9230 N.E. 2nd Ave | | 3. Mailing Office Address 9230 N.E. 2nd Ave | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State Miami Shores, Fla. | | City & State Miami Shores, Fla. | |
| Zip 33138 | Country | Zip 33138 | Country |

| | |
|---|--|
| 4. Date Incorporated or Qualified To Do Business in Florida | May 3rd 2001 |
| 5. FEI Number | <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable |
| 6. CERTIFICATE OF STATUS DESIRED | <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status |

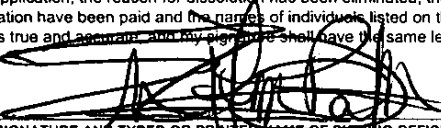
| | | |
|---|-------------|-------------------|
| 7. Name and Address of Current Registered Agent | | |
| Name E. Louise Redmond-Baker | | |
| Street Address (P.O. Box Number is Not Acceptable) 9230 N.E. 2nd Ave | | |
| Suite, Apt. #, Etc. | | |
| City Miami Shores | State FL | Zip Code 33138 |

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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| 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  | Date 11/28/07 |

| 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 |
| Pres. | E. Louise Redmond-Baker | 9230 N.E. 2nd Ave | Miami Shores Fla. 33138 |
| Vice Pres. | Wilnard J. Baker | 9230 N.E. 2nd Ave | Miami Shores Fla. 33138 |
| Officer | Eddie M. Brown | 7691 N.W. 12th Ct | Miami Fla. 33147 |
| Sec. | | | |
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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.

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|---|-----------------------|
| SIGNATURE:  | 11/28/07 305-756-8613 |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date Daytime Phone # |