PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FII FD FLORIDA DEPARTMENT OF STATE CORPORATION Secretary of State REINSTATEMENT 2007 JUL -2 AM 11:57 DIVISION OF CORPORATIONS SECRETARY OF STATE DOCUMENT # NO100000 5049 TALLAHASSEE FLORID Simply Divine Creations, Too, Inc. 2. Principal Office Address - No P.O. Box# 3. Mailing Office Address 2207 Jackson Street 2207 Jackson Street Suite, Apt. #, etc. Suite, Apt. #, etc. 202 202 4. Date incorporated or Qualified 07/16/01 To Do Business in Florida City & State 5. FEI Number Hollywood, FL Hollywood, FL 65-1126214 Not Applicable **3**3020 ÜŜA 33020 **USA** 6. CERTIFICATE OF STATUS DESIRED S.75 Additional Fee required to a Conflicate of Status 7. Name and Address of Current Registered Agent MeeKins, Reverend Mary L. The reinstatement fee is imposed, except in circumstances which the entity did not receive Street Address (P.O. Box Number is Not Acceptable) 12123 Rockwell Way the prior notices. By checking this box, you are certifying the prior notices were not Suite, Apt. #, Etc. received and requesting the reinstatement fee be waived. **Boca Raton** armed corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Date June 21, 2007 Registered Agent REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director Name of Officers and/or Directors Titles City / State / Zlo Meekins, Mary L. Rev. 12123 Rockwell Way D Boca Raton, FL 33428 EX D Williams, Deborah Ms. 2532 NW 9 Place Ft. Lauderdale, FL 33311 Kaye, Loren Ms. 9080 Lime Bay Blvd. Tamarac, FL 33321 D D Servideo, Rosetta, CPA 5500 NW 51 Avenue Coconut Creek, FL 33073 200105868142 97/10/07--01039--010 ***42 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 filling 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. 6.21.07 954.260 SIGNATURE:

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