PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTAT



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State **DIVISION OF CORPORATIONS**

P00000030829 **DOCUMENT #**

1. Corporation Name

CRADLES TO CREATIVITY, INC.

Principal Place of Business

Mailing Address

1577 SUNSET STRIP SUNRISE FL 33313

SIGNATURÉ:

1577 SUNSET STRIP

SUNRISE FL 33313

FILED

02 NOV 25 AH 9: 50

SECRETARY OF STATE TALLAHASSEE, FLORIDA



| If above a | addresses are | incorrect in any way, line t | through incorrect i | information a | and enter correction below. | | | | | | | |
|--|----------------|------------------------------|---------------------|--|-------------------------------|--|---|------------------------------------|--------------|------------------------|----------------|--|
| | | | | w Mailing Office Address, If Applicable | | | 4. Date Incorporated or Qualified To Do Business in Florida 03/22/2000 | | | | | |
| Suite, Apt. | #, etc. | | Suite, Apt. # | Suite, Apt. #, etc. | | | 5, FEI Number | | | Applied For | | |
| City & Stat | e | | City & State | | | 1 | | 65-0994797 | | \rightarrow | Not Applicable | |
| Zip Country | | | Zip | | Country | 6. | CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee requirements for a Certificate of Status | | | | | |
| 7. Names | and Street Add | dresses of Each Officer an | d/or Director (Flo | orida nonpro | fit corporations must list at | least 3 c | lirectors) | | | · : | | |
| Title(s) Name of Officers and/or Directors | | | | Street Address of Eac Officer and/or Director | | | | | | | | |
| PD | RINEY, LAURA | | | 1849 NW 58TH AVENUE | | | -111- | LAUDERHILL FL 33313 | | | | |
| | | | | | | | | | | | | |
| | | | | - | | | | - | | | | |
| ••• | | | | | | | | | | | | |
| | | | **** | | | | 60 11/25/ | 000920)2010630 | 254)10 * | ⊧ © ∗150 | , | |
| 8. Name and Address of Current Registered Agent | | | | | 9. Name a | | | nd Address of New Registered Agent | | | | |
| | 0. 14211 | to and reduced or conto | Name | | | | | | | | | |
| CHUCK MOGBO, P.A. 2800 W. OAKLAND PARK BOULEVARD SUITE 209 OAKLAND PARK FL 33311 | | | | | Street Address | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| | | | | | Suite, Apt. #, Etc. | | | | | | | |
| | | | | | City | City State Zip Code | | | | | | |
| 10. I, bein Signature Registered | of | registered agent of the a | bove named corp | EL SA GLOSS | familiar with and accept the | | ions of Sect | | 517.0505, l | 1 | 2 | |
| | | | NEGIO I EMEDIA | GENT MUS | JUN | | | | | | | |

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 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 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.

DECEMBER A RINEY 10/28/02 954 731-9800 Daylime Phone #

CRADLES TO CREATIVITY INC. 1577 Sunset Strip, Fl. 33313 (954) 731-9806

November 19, 2002

Florida Department of State Divisions of Corporations P O Box 6327 Tallahassee, Fl 32314

Re: F.E.I. # 65-0994797 2002 Uniform Business Report

Dear Sirs:

We have checked all our records and did not see where previous notices were sent with regard to the above-mentioned form until November 2002, when we received the Notice of Dissolution in the mail.

We are hereby requesting that the penalty be abated, and that we be allowed to pay One Hundred and Fifty Dollars (\$150.) as, in the past, we have sent out the UBR form in a timely manner and this was an honest mistake. If there are any questions please call me at the above number.

Sincerely,

Mrs. Laura Riney-President