

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

182
FILED
Nov 01, 2007 8:00 A.M.
Secretary of State

DOCUMENT # P00000063460

1. Corporation Name

ADVANTAGE KIDS USA, INC.

2. Principal Office Address - No P.O. Box #
8001 Sheldon Road

Suite, Apt. #, etc.

City & State
Tampa, FL

Zip Country
33615-1952 USA

3. Mailing Office Address
8001 Sheldon Road

Suite, Apt. #, etc.

City & State
Tampa, FL

Zip Country
33615-1952 USA

REINSTATEMENT
CR2E081 (1/07) 06-07

4. Date Incorporated or Qualified To Do Business in Florida **6/23/2000**

5. FEI Number **59-3654152**

Applied For
Not Applicable

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

7. Name and Address of Current Registered Agent

Name
Annie Laurie Guy

Street Address (P.O. Box Number is Not Acceptable)
8001 Sheldon Road

Suite, Apt. #, Etc.

City State Zip Code
Tampa FL 33615-1952

☒ 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.

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 Annie Laurie Guy
REGISTERED AGENT MUST SIGN

Date 10/31/2007

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
P	Annie Laurie Guy	8001 Sheldon Road	Tampa, FL 33615-1952

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.

SIGNATURE: Annie Laurie Guy Annie Laurie Guy 10/31/2007 813.431.5464
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

B. Mitchell NOV 2 2007

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: ADVANTAGE KIDS USA, INC.
DOC#: P00000063460
FEI# : 59-3654152

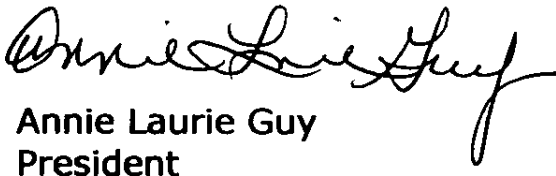
October 29, 2007

Dear Sir or Madam:

I hereby request waiver of reinstatement fee due to non-receipt of prior notice(s). Receipt of mail for nearby condominium owners has been delivered erroneously to my business address, and vice versa. I have spoken with my mail carrier and local post office to rectify this.

Thank you for your kind consideration in this matter.

Sincerely,

 10/31/2007
Annie Laurie Guy
President