

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 OCT 28 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000076232**

1. Corporation Name

SPECTRUM TOYS-GIFTS-ACCESSORIES, INC.

Principal Place of Business

Mailing Address

P. O. BOX 6
ROSELAND FL 32957

P. O. BOX 6
ROSELAND FL 32957

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

673 Lake Drive Suite A

**Suite, Apt. #, etc.
673 Lake Drive Suite A**

Sebastian, FL

**City & State
Sebastian**

City & State

Zip
32958

Country
Indian River

Zip
32958

Country
Indian River

REINSTATEMENT 03



300024185203
10/28/03--01004--027 **158.75

4. Date Incorporated or Qualified
To Do Business in Florida

07/15/2002

5. FEI Number

050522298

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	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
Mr	HOUCK, ALLEN	P.O. BOX 6 673 Lake Drive	ROSELAND FL 32957 Sebastian FL 32958
Mr	HOUCK, MARLA	P.O. BOX 6 673 Lake Drive	ROSELAND FL 32957 Sebastian, FL 32958

8. Name and Address of Current Registered Agent

**LOOMAR, L. GREGORY ESQ.
1152 N. UNIVERSITY DR.
PEMBROKE PINES FL 33024**

9. Name and Address of New Registered Agent

Name **Allen Houck**
Street Address (P.O. Box Number is Not Acceptable)
673 Lake Drive
Suite, Apt. #, Etc.
Suite A
City **Sebastian** State **FL** Zip Code **32958**

10. 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

Allen Houck

REGISTERED AGENT MUST SIGN

Date **10/15/03**

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:

Allen Houck **Allen Houck**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/15/03 772-581-8401

CR2E040 (7/03)

SPECTRUM TOYS-GIFTS-ACCESSORIES, INC.
TOYS 4 U GIFTS 2 STORES ~ Melbourne & Wellington, Florida
OFFICE: 673 Lake Drive, Suite A, Sebastian, Florida 32958 772.581.8401 (PH) 772.581-8430 (FAX)

October 24, 2003

To whom it may concern:

Please note that this is the first letter we have received regarding the Uniform Business Report. Please find enclosed check number 653 made payable to the Department of State in the amount of \$158.75. This includes \$150.00 for the filing fee and \$8.75 for the Certificate of Status. We ask that you waive the late fees. Please reinstate us as a corporation and change our mailing address to 673 Lake Drive, Suite A, Sebastian, Florida 32958.

Thank you very much for your assistance.

Sincerely,



Allen Houck
President
Spectrum Toys-Gifts-Accessories, Inc.