PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P02000097423

1. Corporation Name

MAGIC CARE INC

Principal Place of Business

Mailing Address

344 SCOTTSDALE SQUARE WINTER PARK FL 32792

344 SCOTTSDALE SQUARE

FILED

03 NOV 18 PM 3: 45

SEUNCHARY OF STATE
TALLAHASSEE, FLORIDA

WINTER PA	RK FL 32792	WINTER PARK FL	WINTER PARK FL 32792			TO BELLEVISADE IN DAMA HALL BANK BANK BANK CANA LANG BANK BANK WARD CON HALL		
				•		TOTATE IN		
. If above addresses are incorrect in any way, line through incorrect information and enter correction below.					l Messa			
New Principal Office Address, If Applicable New Mailing Office Address, If Applicable					Date Incorporated or Qualified			
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.				ed woods a	∠ To Do Busir	ness in Florida	9/05/2002	
Suite, Apt. *, etc.			, 616.		5. FEI Number Applied		Applied For	
City & State City & S			te 1		11-	11-3451433 Not Applicable		
		ORMAN	Country Country		6. \$8.75 Additional Fee requ		8.75 Additional Fee required	
		35858			CERTIFICATE OF STATUS DESIRED La 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) Name of Officers and/or Directors		3	Street Address of Each Officer and/or Director			City /	State / Zip	
Р	DUBE, STEVEN M		344 SCOTTSDALE SQUARE			WINTER PARK FL 32792		
VP	ALVEREZ, ELIUD	716	716 MALONEY LANE			ORLANDO FL 32825		
				600024799906 11/18/0301045020 **150.00				
							Mohr	
							4	
8. Name and Address of Current Registered Agent					9. Name and Address of New Registered Agent			
DUBE, STEVEN M				Name ELiuD AIVEREZ Street Address (P.O. Box Number is Not Acceptable) BOSS WATER GRO Woods CIR Suite And # Flo				
344 SCOTTSDALE SQUARE				13025 (JATER GRO) Woods CIR # 101				
WINTER PARK FL 32792				Guile, Apt. #, Etc.				
				City City		Sta	Ja Zio Codo	
				ORIAN	190	F		
10. 1, 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 Agent Agent Must Sign								

COMMINDE DECLIDED

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

11-11-63

321-229-6178

Magic Care Inc, PO Box 781476 Orlando Fl 32878

To:

Department of the State

Form: Magic Care Inc. Subject: Request Waiver

Hello my name is Steven Dube. I am an owner or partner of a company called Magic Care. I recently changed addresses and moved. During the process through the post service I filed 3 changes of addresses. For about a month the US Postal Services lost all of my personal and business mail. This includes all of bills, checks for payroll, simply put all mail. Although I believed I received everything, apparently I did not receive anything about a renewal for my companies renewal of the Incorporation. I did not receive any UBR of any sort. I spoke with a representative from the Department of the State, they told me to type this letter in regard to this situation to receive the waiver. They also stated to send a money order for the amount of One Hundred Fifty Dollars to renew my status.

If there are any questions or concerns you may contact me at your convenience. My personal cel: 321-231-9801 or my company number is 321-229-6178. Thank you for your time and cooperation.

The Mary Control of

ran na kanada na kan Na kanada n