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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 DEC 29 PM 4:48

DOCUMENT # P03000033333

1. Corporation Name

CREATIVE FLYING COLORS INC

REINSTATEMENT 04-05

CR2E081 (8/05)

2. Principal Office Address	**3.** Mailing Office Address
3545 FOREST HILL BLVD	9948 WOODWIN LANE
Suite, Apt. #, etc. APARTMENT 8	Suite, Apt. #, etc. LAKE WORTH FL.
City & State WEST PALM BEACH FL	City & State 33467
Zip 33406 / Country PALM BEACH	Zip / Country PALM BEACH.

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number 56 234 1675 100 912 ☐ 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 ERROL D. HENRY

Street Address (P.O. Box Number is Not Acceptable) 3545 FOREST HILL BLVD

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12/29/05--01024--010 **30[illegible].00

Suite, Apt. #, Etc. APT 8

City WEST PALM BEACH FL | State FL | Zip Code 33406

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 _____ Date DEC 24/05

REGISTERED AGENT MUST SIGN

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
PRES	ERROL D. HENRY	3545 FOREST HILL BLVD #8	WEST PALM BEACH FL 33406
VICE	EVELYN M. HENRY	3545 FOREST HILL BLVD #8	WEST PALM BEACH FL 33406
SEC	TIANA S. BALCHAN	3545 FOREST HILL BLVD #8	WEST PALM BEACH FL 33406

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 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: _____ ERROL D. HENRY DEC 24/05 561 358.5794

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

12/29 ab

ATN DARLENE

Dec 24/03

Department of Corporation
Secretary of State

Dear Sir/Madam

Please be informed that I never received any letters about renewal of my corporation. I was not aware that a renewal was necessary as this is the first experience for me. I am very sorry for this but please accept this Three Hundred Dollars Check & reinstate my business.

I no longer reside at the Poinciana Dr. as I have filled out the form with my Current address.

Business — 9948 WOODWIN LANE — LAKE WORTH
HOME — 3545 FORESTHILL BLVD #8 — WEST PALM 33406

Thank You
Yours truely,
Coral D. Drury