

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

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SECRET  
TALLAHASSEE, FLORIDA




REINSTATEMENT 2005

WOP

DOCUMENT # P03000130148					
1. Entity Name THINGS N DREAMS INC					
Principal Place of Business 5046 WOODSTONE CIRCLE NORTH LAKE WORTH, FL 33463 US			Mailing Address 5046 WOODSTONE CIRCLE NORTH LAKE WORTH, FL 33463 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 56-2415975	
Zip		Country		Applied For <input type="checkbox"/> Not Applicable	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent AYMERICA, ALEXANDER 5046 WOODSTONE CIRCLE NORTH LAKE WORTH, FL 33463			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL		Zip Code
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					

FILE NOW!!! FEE IS \$750.00  
After January 1, 2006, Fee will be \$900.00

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P AYMERICH, ALEXANDER <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	5046 WOODSTONE CIRCLE NORTH LAKE WORTH, FL 33463	NAME	400061952554
STREET ADDRESS	5046 WOODSTONE CIRCLE NORTH LAKE WORTH, FL 33463	STREET ADDRESS	12/06/05--01029--002 **158.75
CITY- ST- ZIP	LAKE WORTH, FL 33463	CITY- ST- ZIP	
TITLE	SEC <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRODLIEB, ALICE	NAME	
STREET ADDRESS	5046 WOODSTONE CIRCLE NORTH LAKE WORTH, FL 33463	STREET ADDRESS	
CITY- ST- ZIP	LAKE WORTH, FL 33463	CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Alexander Aymerich Dec. 1, 2005 561-389-5823  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
*(President)*

Dec. 1, 2005

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To: Division of Corporations

Would you please be kind and waive reinstatement fee. We did not receive prior notification in reference to this.

Enclosed please find a check made out for \$158.75. I am so grateful for your time and consideration.

Sincerely,  
Alexander Ayerich

P.S. Called today and was told to send this letter of explanation and the check. Again, Thank you