

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. *Page 1 of 2*

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # *PO5000091450*

1. Corporation Name

**All Tied Up Boutique, Inc.**

2. Principal Office Address - No P.O. Box #

**355 W. Church St**

3. Mailing Office Address

**5113 Park Central Drive**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**ORLANDO, FL**

City & State

**ORLANDO, FL**

Zip

**32801**

Country

Zip

**32839**

Country

**USA**

**7. Name and Address of Current Registered Agent**

Name

**Alonzo L. Adams**

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

**355 W. Church St**

Suite, Apt. #, Etc.

City

**ORLANDO, FL**

State

**FL**

Zip Code

**32801**

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

*Alonzo L. Adams*  
REGISTERED AGENT MUST SIGN

Date **01/31/2007**

**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
PD	Alonzo L. Adams	5113 Park Central Drive	ORLANDO, FL 32839

**REINSTATEMENT**

*Bell 1/27/07*  
*06-07*

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:

*Alonzo L. Adams*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/31/2007

Date

407 297-3700

Daytime Phone #

FILED  
2007 APR 24 AM 10:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

500102645595  
05/16/07--01037--025 \*\*\*300.00

CR2E081 (1/07)

4. Date Incorporated or Qualified  
To Do Business in Florida

**06/27/2005**

5. FEI Number

**59-3632562**

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

☐ 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.



*BJ Adams*  
*& Associates*

Professional Accountants

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January 31, 2007

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL

This letter is to inform you that All Tied Up Boutique, Inc. has never received their reinstatement notice for 2006 or 2007. Due to these circumstances we are asking that you abate the restatement fees. The payment of \$300.00 is enclosed for the said years. If there are any questions concerning this matter please feel free to contact me at 407 207-3700. The Document # P05000091450.

Your consideration concerning this matter is greatly appreciated.

Cordially,

Barbara J. Adams  
Accountant

All Tied Up Boutique, Inc. Alonzo Adams, President

Barbara J. Adams, CEO  
805 S. Kirkman Rd. - Ste 203 - Orlando, FL 32811  
(407) 297-3700 Office - (407) 297-3500 FAX  
1-800-897-3230 Toll Free  
email : bjadamsnassoc@yahoo.com