

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 MAY 20 PM 2:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000050716**

1. Corporation Name
Color My World Preschool & Day Care, Inc.

REINSTATEMENT 03.05

2. Principal Office Address 2674 MLK Jr. Way Sarasota 34234		3. Mailing Office Address 2537 Bougainvillea St Sarasota, FL 34239	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Sarasota, FL		City & State Sarasota, FL	
Zip 34234	Country US.	Zip 34239	Country

4. Date Incorporated or Qualified To Do Business in Florida 7/8/1994	
5. FEI Number 650515409	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	\$3.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent		
Name Marci Vitkus		
Street Address (P.O. Box Number is Not Acceptable) 2537 Bougainvillea St		
Suite, Apt. #, Etc.		
City Sarasota	State FL	Zip Code 34239

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: **Marci Vitkus** Date: **5/18/05**

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
PS	Marci Vitkus, Pres.	2537 Bougainvillea St	Sarasota, FL 34239
VPT	Andrius Vitkus, VP	" "	" "
			05/20/05--10:05--012 **450.00

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: **Marci Vitkus** **Marci Vitkus, Pres.** Date: **5/18/05** Daytime Phone #: **941-366-1826**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (01/05)

Dept. Of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

On May 18, I spoke to Kathy Ashton regarding our corporate status. We are sending in a form for reinstatement and requesting to have the fee waived. We never received our yearly notices. Enclosed please find \$450 for the payment of the previous 3 years dues. We would appreciate if all future correspondence is mailed to: 2537 Bougainvillea St, Sarasota, FL 34239.

Thank you,



Marci Vitkus
Pres., Color My World Preschool and Child Care, Inc.