

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 DEC -6 AM 8:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

Sophie's Creations

P 96 000094811

2. Principal Office Address

366 E. Palmetto Park Rd

3. Mailing Office Address

366 E. Palmetto Park Rd

Suite/Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boca Raton FL

City & State

Boca Raton FL

Zip

33432

Country

USA

Zip

33432

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

Sept 23, 1997

5. FEI Number

65-0735383

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

Sophie Diaz

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

8717 BINGHAMTON Ave

Suite, Apt. #, Etc.

City

Boynton Bch

State
FL

Zip Code

33436

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

REGISTERED AGENT MUST SIGN

Date 4-25-02

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	Sophie Diaz	8717 BINGHAMTON Ave	Boynton Bch FL 33436
VP	Guillermo Diaz	8717 BINGHAMTON Ave	Boynton Bch FL 33436
D	Guy Augier	6439 Parkview Dr	Boca Raton FL 33433

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SOPHIE AUGIER DIAZ 4-25-02 5617401762

Date

Daytime Phone #

CR2E081 (3/01)

7/12/10

To whom it may concern,

After talking to you on the phone because I did not receive my Business Report 2002, I realized that you had an old address. So you were sending me documents that I had never received. You also mentioned that you had giving me late penalties. So please waive the late penalties because I never receive the Form Reinstatement Non Profit letter. I am now sending you the \$150 dollar for 2002 with the Reinstatement letter that I downloaded on the computer.

My new address is: Sophie's Creations
366 E - Palmetto Park Rd
Boca Raton FL 33432.

Old address: 7040 W. Palmetto Park Rd
Boca Raton FL 33433

12-4-02

To Dept of State

You sent me my \$150 check for 2002, saying that I had to pay \$300 because I did not pay \$150 for 2001, but I did pay it and you already cashed my check. I called you and a gentleman said that I needed to write a letter explaining the problem. Please let me know what to do. Thank you for your help.

Sque Diaz

Sque's Creations

366 E. Palmetto Park Rd

Boca Raton FL 33432

Fax 561-740-1823

Phone 561-740-1762