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| DOCUMENT # P970000 | 093386 (5) | | | , 0, 0, | | |
| VALUE CARD & GIFT, INC. | | | FILED | | | |
| Principal Place of Business 8912 N. MILITARY TRAIL 8912 N. MILITARY TRAIL | | | | -9 PM 3: 02 | | |
| PALM BEACH GARDENS, FL 334 | 33 <u>410</u> | GARDENS, FL | TALLAHA | ARTIOFISTATE SSEE:IFLORIDA | | |
| Principal Place of Business 3. Mailing Address | | | _ | 0.0 | | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | DO NOT WRITE IN THIS SPACE (C) | | } | |
| City & State City & State | | | 4. FEI Number | Applied For Not Applicable | - | |
| Zip Country | Zìp | Country | 65-0793727 5. Certificate of Status Desir | \$9.75 Additional | 1 | |
| 6. Name and Address of Current Registered Agent | | Name | 7. Name and Address of No | w Registered Agent | 7 | |
| ROYCE, RAYMOND W. | | Name | | | | |
| 4400 PGA BLVD. PALM BEACH GARDENS, FL 33410 | | Street Addre | ss (P.O. Box Number is Not Accept | able) | } | |
| | | City | FL Zip Code | | | |
| 8. The above named entity submits this statement for | or the purpose of changing its | registered office or regis | stered agent, or both, in the State of | of Florida. | | |
| SIGNATURE Signature, typed or printed harne of registered agent | and title if applicable. (NOTE | Registered Agent signature req | uired when reinstating) | DATE | | |
| , | | ! FEE IS \$150.00 It Fee will be \$550.0 Ie to Department of \$ | i irusi cuna Corria | - - +0.00, 50 | | |
| 11. OFFICERS AND | | 12. | | OFFICERS AND DIRECTORS IN 11 |]ू | |
| SLATE, GARY, M. STREET ADDRESS CITY-ST-ZIP 10813 EGRET POINT PL | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 6000L -04 *** | 14013656 - Code /17/01-01077-013 **450.08 ****450.00 | 5034 (11/00) | |
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| STREET ADDRESS CITY-ST-ZIP 13. L baseby codifict that the information purelied with | this filling doop not await for | STREET ADDRESS CITY-ST-ZIP | Section 110 07/0/83 Fig. 24- 0: | 16 Marie Mar | | |
| 13. I hereby certify that the information supplied with indicated on this report or supplemental report is of the corporation or the receiver or trustee empor changed, or on an attachment with an address, very changed. | true and accurate and that my owered to execute this report a | / signature shall have th | e same legal effect as if made und | ler oath; that I am an officer or director | } | |
| SIGNATURE: | 1 20000 | SLATE, PRES | IDENT 4/02/20 | | | |

VALUE CARD & GIFT, INC. 8912 North Military Trail Palm Beach Gardens, Florida 33410 561-624-4121

March 20, 2001

Florida Department Of State Division Of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Re: Document # P9700093386 FEI Number: 65-0793727

To Whom It May Concern:

I am writing to ask for a reversal of the Administrative Dissolution which was filed against me on September 24, 1999. I just found out that my corporation had been dissolved when my new bookkeeper mentioned to me that I had not received a Uniform Business Report for the current year. until recently and prior to 1999 all my tax work, document filings and other important paperwork had been the responsibility of my wife, who is the Vice Present of my corporation, Suzanne Slate. We became involved in divorce proceedings in 1999, but she continued to work as bookkeeper for Value Card & Gift, Inc. I was unaware that she was sabotaging my business by destroying important documents and neglecting to file several important papers, including my annual report.

My new bookkeeper has prepared an Annual Report for 1999, 2000 and 2001 which I am sending along with a check in the amount of \$450.00 to cover each year. Please consider my request for reinstatement as I was the victim of dishonorable actions. Thank you for your attention to this matter.

Sincerely,

Gary Slate, President Value Card & Gift, Inc.