

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



Katharine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 MAR 23 PM 4:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P9800000849.07

1. Corporation Name

Thought Source, Inc.

Letter Number: 498A00049331

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-04/04/00--01103--005

***300.00 ***300.00

2. Principal Office Address

701 SW 16th Ct

Suite, Apt. #, etc.

City & State

Ft Lauderdale, FL

Zip

Country

33315

US

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

4. Date Incorporated or Qualified
To Do Business in Florida

10/2/98

5. EEL Number

65-0869802

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

Ken Lavan

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

701 SW 16th Ct

Suite, Apt. #, Etc.

City

Ft Lauderdale

State

FL

Zip Code

33315

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

[Signature]

REGISTERED AGENT MUST SIGN

Date 3/4/00

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
EO	Ken Lavan	701 SW 16th Ct	Ft Lauderdale, FL 33315
COO	Kaila Colbin	2550 SW 18th Terrace Apt 2119	Ft Lauderdale, FL 33315

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/4/00
Date

954.764.7761
Daytime Phone #

CR2E081 (9/99)

thoughtSource, Inc.

pg. 2 of 2
Attachment

March 7, 2000

To Whom It May Concern:

It has recently come to my attention that ThoughtSource, Inc. is no longer an active corporation in the state of Florida. At this time I would like to state that the corporation neither received any forms to fill out nor did the corporation receive notification that it had to complete any forms. At the time of the original filing of corporate documents we were located at 1521 Alton Rd, Suite 74, Miami FL 33139. In June of 1999 we relocated to Ft. Lauderdale, providing the post office with notification of our move.

~~Please reinstate our corporation for the amount due as if the forms were completed on time, as we did not receive the forms in order to complete them in a timely fashion.~~

Thank you very much for your time.

Very truly yours,



Ken LaVan
ThoughtSource, Inc.
President