

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

AND FILED

**CORPORATION
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 JUL -2 PM 1:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000089061

1. Corporation Name

PIXIE DUST & STEEL STABLES, INC.

2. Principal Office Address

225 SEABREEZE AVENUE

Suite, Apt. #, etc.

City & State

PALM BEACH FL

Zip

Country

33480

USA

3. Mailing Office Address

225 SEABREEZE AVENUE

Suite, Apt. #, etc.

City & State

PALM BEACH FL

Zip

Country

33480

USA

REINSTATEMENT 02-03

4. Date incorporated or Qualified To Do Business in Florida

10/19/1998

5. FEI Number

65-0876378

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

VINCENT M. GENDUSA, CPA

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

470 COLUMBIA DRIVE

Suite, Apt. #, Etc.

SUITE G 101

City

WEST PALM BEACH

State

FL

Zip Code

33409

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

Date

6/9/03

REGISTERED AGENT MUST SIGN

Vincent M. Gendusa, CPA

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 Officers and/or Director	City/State/Zip
D/P/T/	HELEN ATWATER-RICH ROSBURG	225 SEABREEZE AVENUE	PALM BEACH, FL 33480
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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:

HELEN ATWATER-RICH ROSBURG

561-655-8040

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #