PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM SECRETARY OF STATE TALLAHASSEE, FLORIDA 01 JUL 16 AH 9: 25 DOCUMENT # \P99.000021397 1. Corporation Name Creative Services of Purtha Gorda, INC. 300004494263--6 -07/24/01--01089--019 ****150.00 ****150.00 2. Principal Office Address 3. Mailing Office Address 1133 BA / HARbor BIVD Suite. Apt. #, etc. 1133 BAI HARbOR Blub. 06/30/00 90004032 4550 4. Date Incorporated or Qualified <u># 1139</u> To Do Business in Florida City & State 5. FEI Number Not Applicable \$8.75 Additional Fee required 33950 33*950* for a Certificate of Status 7. Name and Address of Current Registered Agent Street Address (P.O. Boy Number is Not Acceptable) Suite, Apt. #, Etc. 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 Mompoin Registered Agen REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director Titles City / State / Zip 26058 Feather sound Da Putta Gorda, Fl3392 26058 Feather soudby. Purta Gorda, Flassis SP 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 filling 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 ed my signature shall have the same legal effect as if made under oath.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

CR2E081 (9/00)

7/13/01 941-575-7400
Daytime Phone #



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July 13, 2001

Department of State Division of Corporations 409 East Gaines St. Tallahassee, FL 32399

Subject: Reinstatement of Corporation

Dear Sir or Madam:

Enclosed please find an application for Corporation Reinstatement. This form is being submitted per instructions of your office. Apparently our corporation was dissolved by your office for failure to respond to notices sent out. Our corporation never received any of the notices from the Department of States office. Apparently this was the result of your office not entering the change of address which was included on the 2000 UBR form which was submitted on 5/9/2000. A copy of the form is attached as well as a copy of the cancelled check for \$550.00, which was cashed, on 6/2/2000, by the Department of State for the annual filing fee.

I do not believe any penalty should be assessED since the notices were never received and we had no opportunity to correct any problems identified by the Dept. of State. Enclosed is our check for the 2001 Corporation fees.

If further information is required please contact me a 941-575-7400. The mailing address should be to the business as stated on the attached form that is:

1133 Bal Harbor Blvd. #1139 Punta Gorda, FL 33950

I would appreciate your prompt attention to this matter to get our corporation reinstated as quickly as possible.

Thank you,

Walter E. Thompson

Vice President

Creative Services of Punta Gorda, Inc.

POSTAL, BUSINESS AND COMMUNICATION SERVICES 1133 Bal Harbor Blvd. #1139, Punta Gorda, Florida 33950-6574 Tel 941-575-7400 Fax 941-575-7402