PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FILED DIVISION OF CORPORATIONS 00 DCT 24 AM 10: 31 DOCUMENT # P99000047353 1. Corporation Name SECRETARY OF STATE TALLAHASSEE FLORIDA KIDSTREET, INC. Principal Place of Business Mailing Address 8220 S.W. 27TH PLACE 8220 S.W. 27TH PLACE DAVIE FL 33328 DAVIE FL 33328 30/0090102033\$ FOUD If above addresses are incorrect in any way, line through incorrect information and enter correction below Date Incorporated or Qualified To Do Business in Florida 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For City & State City & State Not Applicable \$8.75 Additional Fee required Country Country CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director Name of Officers City / State / Zip Title(s) and/or Directors FORT LAUDERDALE FL 33312 WILEY, DOUGLAS P 2425 N.E. 27TH AVE. D 8220 S.W. 27TH PLACE DAVIE FL 33328 D ALLSWORTH, KATHY 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent ALLSWORTH, E S Street Address (P.O. Box Number is Not Acceptable) 1177 S.E. 3RD AVE. Suite, Apt. #, Etc. FORT LAUDERDALE FL 33316 State Zip Code City 10. I, being appointed the registered egent of the above named corporation, are familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent 11. Leartify 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 indicates on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Zip

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## LAW OFFICES

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\* ALSO ADMITTED IN MICHIGAN

& BOARD CERTIFIED REAL ESTATE LAWYER

\*\* CERTIFIED CIRCUIT CIVIL AND FAMILY MEDIATOR

October 20, 2000

Division of Corporations P.O. Box 6327 Tallahassee, Fl 32314

Re:

Kidstreet, Inc.

Ref: P 99000047357

Filing of Annual Report

Dear Sir or Madam:

Enclosed please find an application for reinstatement which has been completed by my client in accordance with your instructions in your letter of September 19, 2000. The FEI Number has been applied for and I will forward it to ou when I receive it from the IRS.

As per your letter, you are already in receipt of the \$700 fee from our original submittal of September 12, 2000

As both Registered Agent and attorney for the corporation, I would appreciate it if you would contact me directly or copy me with any future correspondence regarding this matter.

Thank you for your assistance.

Sincerely,

E. Scott Allsworth

ESA/gas

Enc. Markett 1911