

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

**CORPORATION**  
**REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE  
20800 LIBE

FILED

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # P99000048826

1. Corporation Name

Home Baked Ltd., Inc.

2. Principal Office Address

1643 NE 14th Avenue

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 290605

Suite, Apt. #, etc.

City & State

Fort Lauderdale, FL

City & State

Davie, FL

Zip

33305

Country

Zip

33329

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

May 28, 1999

5. FEI Number

☒ 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

Jeffrey G. Klein

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

23123 State Road 7

Suite, Apt. #, Etc.

Suite 350-B

City

Boca Raton

State

FL

Zip Code

33428

600003496216-1

12/12/00 01005-010

\*\*\*\*150.00 \*\*\*\*150.00

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

Jeffrey G. Klein

REGISTERED AGENT MUST SIGN

Date 11/20/00

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip |
|--------|--------------------------------------|---|--------------------|
| D/P/S  | Scott Wilcox                         | P.O. Box 290605                                   | Davie, FL 33329    |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   | KE                 |

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:

Scott Wilcox SCOTT Wilcox

11/15/00 954524-0425

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2 of 2

*HOME BAKED LTD., INC.*  
*1643 N.E. 14<sup>th</sup> Avenue*  
*Fort Lauderdale, Florida 33305*

November 16, 2000

Department of State  
Division of Corporations  
Attn: Annual Reports  
P.O. Box 6327  
Tallahassee, Florida 32314

RE: Home Baked Ltd., Inc. (the "Corporation")  
Document No.: P99000048826

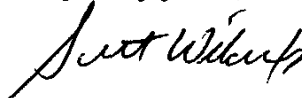
Dear Sir or Madam:

It was recently brought to our attention that the above-referenced Corporation was revoked for failing to file the annual report/uniform business report for 2000. Attached hereto is a Corporation Reinstatement and our check in the amount of \$150.00, payable to the Department of State, for filing fees. Due to never receiving the 2000 Uniform Business Report ("UBR"), nor a second notice, it is our request that you please file the attached Reinstatement and waive the \$600.00 penalty.

Should you have any questions regarding the enclosed, please do not hesitate to contact our representative handling the Reinstatement, Lisa Lanius, Legal Assistant, at (954) 527-6221.

Thank you in advance for your assistance.

Very truly yours,



Scott Wilcox  
President

cc: Brian S. McHugh, Esq.