PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE APPLICATION Sandra B. Mortham √. FOR Secretary of State "REINSTATEMENT DIVISION OF CORPORATIONS 02 OCT -7 AMII: 32 DOCUMENT # P99000055594 Corporation Name PEZ, INC. SECRETARY OF STATE -10/11/02--01022--028 Mailing Address Principal Place of Business ****750.00 ****750.00 2500 Hollywood Blvd. 2500 Hollywood Blvd. Suite 212 Suite 212 REINSTATEMENT Hollywood, Fl. 33020 Hollywood, F1. 33020 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 3. New Mailing Office Address, If Applicable 2811 N.W. 12th Avenue New Principal Office Address, if Applicable 2811 N.W. 12th Avenue 4. Date Incorporated or Qualified To Do Business in Florida June 18, 1999 Suite, Apt. #, etc. Suite, Apt. #, etc. 5 FEI Number Applied For 650933660 City & State City & State Not Applicable Fort Lauderdale, Fort Lauderdal ountry CERTIFICATE OF STATUS DESIRED ÚSA 33311 33311 USA 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each Title(s) City / State / Zip and/or Directors Officer and/or Director (Do NOT Use Post Office Box Numbers) **PVP** Peter E. 2811 N.W. 12th Avenue Zon, Fort Lauderdale, Florida ST 33311 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Joseph P. Klapholz, Esq. Manella & Klapholz Street Address (P.O. Box Number is Not Acceptable) 2500 Hollywood Boulevard, Suite 212 Hollywood, F1. 33020 Suite, Apt. #, Etc. City Zip Code State 10. I, being appointed the registered agent of the about od corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent RED AGENT MUST SIGN This corporation owes or has paid the current year (See other side for information on intangible tax.) Yes V Intangible Personal Property tax due June 30. 12. 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: TER E.J.