PLEASE READ	ALL INSTRUCTIONS BEFORE (	COMPLETING THIS FORM.	
APPLICATION PROPERTY APPLICATION OF THE PROPERTY APPLICATI	FLORIDA DEPARTMENT OF STATE  Katherine Harris  Secretary of State  DIVISION OF CORPORATIONS	SECRETARY OF SA DIVISION OF CORPOR	ATE ATIONS
DOCUMENT # V6237  1. Corporation Name	1	OINOVIS PM 5	
DOLLS & TOYS TO TREASURE	EINC.		
Principal Place of Business  402 SE MIZNER BLVD  BOCA RATON FL 33432 US	Mailing Address 402 VIA DE PALMA BOCA RATON FL 33432 US		
If above addresses are incorrect in any way, line thro	ough incorrect information and enter correction below.		
New Principal Office Address, If Applicable  Suite, Apt. #, etc.	New Mailing Office Address, If Applicable     Suite, Apt. #, etc.	Date Incorporated or Qualified     To Do Business in Florida     09/04/1	992
City & State	City & State	5. FEI Number 65-0353019	Applied For Not Applicable
Zip \$ 33483 Country U.S.A	Delay Sch to 33483 Zip 33483 Country USA	S8.75 Add	ditional Fee required ertificate of Status
-7. Names and Street Addresses of Each Officer and/	or Director (Florida nonprofit corporations must list at lea	st 3 directors)	
Title(s) Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Z	
	3		'P

8. Name and Address of Current Registered Agent	9. Name and Ac	Name and Address of New Registered Agent	
	Name _		
JHAZIE, GEORGE 201 South Ocean Blvd.	Street Address (P.O. Box Number is Not Acceptable)		
H-4	Suite, Apt. #, Etc.		
HIGHLAND BEACH FL 33487	City	State Zip Code	

3201 S OCEAN BLVD PH-4

11. 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 accurate, and my signature shall have the same legal effect as if made under oath.

VS

UHAZIE, MARION

SIGNATURE: Elevine & Whaze Signing Officer or Director

REGISTERED AGENT MUST SIGN

11/(/01 330-3433-Date Daytime Phone #

HIGHLAND BEACH FL

300004711723:

-12/06/01--01051--001 \*\*\*\*150.00 \*\*\*\*150.00

DOLLS & TOYS TO TREASURE 126 NE 6TH AVE DELRAY BCH, FL 33483 (561) 330-3433

Per my phone conversation with your office I am sending the original \$150.00 fee for the uniform report. Due to our store address location change we did-not recieve original request.

THANK YOU,

JANET KYSIA

**Enclosures**