## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## **APPLICATION** FOR REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

P00000022819 DOCUMENT #

1. Corporation Name

DAS REALTY GROUP, INC.

Principal Place of Business

Mailing Address

6289 W. SUNRISE SUNRISE FL 33313

Stc 177

3138 SW 14 STREET FT LAUDERDALE FL 33312 FILED

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TALLAHASSEE. FLORIDA



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If above addresses are incorrect in any way, line through incorrect information and enter correction below.						[10\] \\\02\-01022052, *** too. oo.				
2. New Principal Office Address, If Applicable  3. New Maili  DAS REALTY GROUP INC.				ng Office Address, If Applicable			Date Incorporated or Qualified     To Do Business in Florida     02/28/2000			
Suite, Apt. 6	COLUBIUS AND HISS	Suite, Apt. #,	etc.			5. FEI Number	,	02/20/20	Applied For	
City & State Cours See F/									Not Applicable	
Zip 333/3 Country C/1/10 Zip			Country			6. CERTIFICATE OF STATUS DESIRED  for a Certificate of Status				
7. Names a	and Street Addresses of Each Officer and/	or Director (Flo	rida nonprof	fit corporations m	ust list at lea	st 3 directors)				
Title(s)	Name of Officers and/or Directors		Street Address of Each Officer and/or Director				City / State / Zip			
PD	DAS, VICTOR N		6289 N S	SUNRISE BLVD	., STE <del>262</del> -	177	SUNRISE FL 33313			
VPD	DAS, PARBATIE			6289 W. STE. 262 / J L			SUNRISE FL 33313			
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8. Name and Address of Current Registered Agent						9. Name and Address of New Registered Agent				
N					9					
MYERS, PEG CPA 9501 SEAGRAPE DR. #104					Street Address (P.O. Box Number is Not Acceptable)					
FT LAUDERDALE FL 33324				Suite	, Apt. #, Etc.					
				City				tate Zip Co	ode	
10. I, being	appointed the registered agent on the about	ve named corpo	eration, am f	amiliar with and a	accept the ob	ligations of Secti	on 607.0505, F.S. or 617.			

Registered Agent

REGISTERED AGENT MUST SIGN

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAS REALTY GROUP INC 6289 W SUNRISE BLVD.STE 122 SUNRISE ,FI\_33313

THE CORPORATION UBR NOTICES THAT WAS SENT TO ME WAS NOT RECEIVED AND I AM ASKING FOR THE FEE TO BE WAIVED. PLEASE RE-INSTATE MY CORPORATION AND MAKE THE NECESSARY CHANGES ON MY ADDRESS.

10-13-03

DATE

Parbate Das

10-13-03

VICE-PRESIDENT

DATE