2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F01000003526

Entity Name: DIGITAL INTERACTIVE STREAMS, INC.

FILED Nov 28, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
11265 ALU SUITE 200 JACKSON		246					
Current Mailing Address:				New Mailing Address:			
11265 ALU SUIT 200 JACKSON	JMNI WAY VILLE, FL 322	246					
FEI Number:	59-3676574	FEI Number Applied For ()	FEI Num	ber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
O'BRIEN, ROYAL J 11265 ALUMNI WAY SUITE 200 JACKSONVILLE, FL 32246 US The above named entity submits this statement for the purpose				MARK YOUNG, P.A. 12086 FORT CAROLINE RD. UNIT 202 JACKSONVILLE, FL 32225 US of changing its registered office or registered agent, or both,			
	e of Florida.						
SIGNATURE: /MARK J. YOUNG/ Electronic Signature of Registered Agent				11/28/2005 Date			
	ce with s. 607.19	3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().		ne prior notic	e.	Date	
OFFICERS	S AND DIREC	TORS:		ADDITION	S/CHANGE	S TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	O'BRIN, ROYA	WAY, SUITE 200		Title: Name: Address: City-St-Zip:	O'BRIEN, RO 11265 ALUM	(X) Change()Addition YYAL NI WAY, SUITE 200 .LE, FL 32246 US	
Title: Name: Address: City-St-Zip:	LUTTER, WILL	WAY, SUITE 200		Title: Name: Address: City-St-Zip:	LUTTER, WIL 11265 ALUM	(X) Change ()Addition LLIAM D NI WAY, SUITE 200 LLE, FL 32246 US	
Title: Name: Address: City-St-Zip:	D (SHAW, MATTH 11265 ALUMNI JACKSONVILL	WAY		Title: Name: Address: City-St-Zip:	SHAW, MATT 11265 ALUM	(X) Change()Addition THEW W NI WAY, SUITE 200 LLE, FL 32246 US	
Title: Name: Address: City-St-Zip:	ST (BRAUNLICH, S 11265 ALUMNI JACKSONVILL	WAY		Title: Name: Address: City-St-Zip:	BRAUNLICH, 11265 ALUM	(X) Change () Addition SANDRA S NI WAY, SUITE 200 LLE, FL 32246 US	
Title: Name: Address:	() Delete		Title: Name: Address:	PARSONS, R	()Change(X)Addition RICHARD G NI WAY, SUITE 200	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip: JACKSONVILLE, FL 32246 US

SIGNATURE: /SANDRA BRAUNLICH/ S/T 11/28/2005

City-St-Zip: