

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # F04000004421

1. Entity Name
DATA SYSTEMS INTERNATIONAL CORPORATION



Principal Place of Business
240 SOUTH 200 WEST, STE. 105
FARMINTON, UT 84025

Mailing Address
PO BOX 750
FARMINTON, UT 84025

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Farmington

City & State

Farmington

Zip

Country

Zip

Country



REINSTATEMENT 05
10-13-05 REIN P CR2E098 (6/04)

4. FEI Number
87-0412185

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FLORIDA RESEARCH & FILING SERVICES, INC.
1211 CIRCLE DR.
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Lidia E. Lott, as agent*

10-18-05

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2006, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE C ☐ Delete
NAME CHAMPAGNE, CART
STREET ADDRESS 4107 BRIDLEWOOD DRIVE
CITY-ST-ZIP BOUNTIFUL, UT 84010

TITLE P ☐ Delete
NAME BINGEL, BRIAN
STREET ADDRESS 2751 EAST 4430 SOUTH
CITY-ST-ZIP HOLLADAY, UT 84124

TITLE VP ☐ Delete
NAME TALBOT, DAVID
STREET ADDRESS 9006 KINGSWOOD PLACE
CITY-ST-ZIP WACO, TX 76712

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME Champagne, Carl
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 800061066968
CITY-ST-ZIP 11/01/05--01028--020 **\$150.00

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Brian Bingel*

10.13.05

801.451.2885

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

RECEIVED

OCT 18 2005