


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 JUL -2 AM 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT 02-03		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F94000005384 1. Corporation Name DSG DRUGS, INC.			
2. Principal Office Address 9102 W Bay Harbor Drive Suite, Apt. #, etc. Apt # 5-W City & State Bay Harbor, FL Zip 33154		3. Mailing Office Address Same Suite, Apt. #, etc. City & State Zip Country	
		4. Date Incorporated or Qualified To Do Business in Florida 10/17/1994	
		5. FEI Number 36-2486466 Applied For Not Applicable	
		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent			
Name Peter L. Fishel			
		100021269011 07/02/03--01027--005 **300.00	
Street Address (P.O. Box Number is Not Acceptable) 2396 NE 172nd Street Suite, Apt. #, Etc.			
City North Miami Beach, FL		State FL	Zip Code 33160

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: *Peter L. Fishel* Date: 6/25/2003
 REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PC	David Goldberg	9102 W. Bay Harbor Dr #5-W	Bay Harbor, FL 33154
SD	Jane Rozoff	601 Mulberry Place	Highland Park, IL 60035

10. 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: *David Goldberg* David Goldberg, President Date: 6/27/03 Daytime Phone #: 305 968 3065

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DSG DRUGS, INC.
9102 West Bay Harbor Drive
Bay Harbor, FL 33154
(305) 868-3065

25 Jun 2003

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

re: Corporation Reinstatement
F94000005384

To whom it may concern:

Enclosed please find a completed application for Corporation Reinstatement and our check, in the amount of \$300, covering the 2002 and 2003 Annual Reports.

We have no record of receiving any renewal notices (neither the original nor the second notice) for either year and ask that you waive the reinstatement fee.

We have not moved, so we cannot explain why we didn't receive the notices, but we didn't.

Thank you very much for your consideration in this matter.

Very truly yours,



David Goldberg,
President