

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 JUL -8 4:11:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M67914

1. Corporation Name

DSG HOLDING COMPANY, INC.

2. Principal Office Address

1870 N.E. 208 Terrace

Suite, Apt. #, etc.

City & State

North Miami Beach, FL

Zip

33179

Country

USA

3. Mailing Office Address

1870 N.E. 208 Terrace

Suite, Apt. #, etc.

City & State

North Miami Beach, FL

Zip

33179

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida 02/11/88**

5. FEI Number
65-0099572

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status**

7. Name and Address of Current Registered Agent

Name

David Shomers

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

1870 N.E. 208 Terrace

Suite, Apt. #, Etc.

City

North Miami Beach, FL

State

FL

Zip Code

33179

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

David Shomers Pres.

Date 07/06/04

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
P,D	David Shomers	1870 N.E. 208 Terrace	North Miami Beach, FL 33179
VSTD	Anthony R. Andreoni	1870 N.E. 208 Terrace	North Miami Beach, FL 33179

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 Shomers Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7-6-04

Daytime Phone #

305-705-0708

CR2E061 (01/04)

TERMINELLO & TERMINELLO, P.A.

ATTORNEYS AT LAW

2700 S.W. 37 AVENUE

MIAMI, FLORIDA 33133-2728

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ALSO ADMITTED IN:

*NEW YORK
*WASHINGTON, D.C.

**NEW YORK

ELI GUERRIERI
LICENSING ADMINISTRATOR
E-MAIL: eguerrieri@terminello.com

(305) 444-5002
FAX: (305) 448-5566
Website: www.terminello.com

PLEASE REPLY TO:
MIAMI

BROWARD OFFICE
2455 HOLLYWOOD BLVD.
SUITE 118
HOLLYWOOD, FL 33020
(954) 929-9600

DANIELLE M. TERMINELLO
LEGAL ASSISTANT
E-MAIL: danielle@terminello.com

MICHAEL H. TARKOFF
LITIGATION SUPPORT
E-MAIL: mtarkoff@terminello.com

July 6, 2004

Florida Department of State
DIVISION OF CORPORATIONS
P.O. BOX 6327
Tallahassee, FL 32314

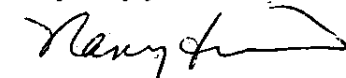
RE: DSG HOLDING COMPANY, INC.
M67914

Dear Sir or Madam:

Enclosed please find a reinstatement form for the above captioned along with a check in the amount of One Hundred and Fifty (\$150.00) Dollars as and for the fees due for 2004. Please note that DSG Holding Company, Inc. did not receive an annual report form for 2004 due to a change in address. Please consider our request for a waiver of the penalty.

Thank you for your kind consideration in this matter. Of course, should you have any questions in this regard, please do not hesitate to contact me.

Very truly yours,


Nancy Terminello

NT/nt
Encls. as stated

Charter Number Only

VALIDATION ONLY

7/6/04

Nancy Terminello

Requestor's Name

2700 SW 37 Ave

Address

Miami FL

City

State

ZIP

Phone

5002A

CORPORATION(S) NAME

DSG Holding Company, Inc.
467914

RECEIVED
04 JUL -8 AM 10:35
DIVISION OF CORPORATION

- | | | |
|---|--|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Foreign | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> Reinstatement | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Certificate Under Seal |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| | | <input type="checkbox"/> Mail Out |

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier



Empire Toll Free: 1-800-432-3028