PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. SECRETARY OF STATE TALLAHASSEE, FLORIDA **4ENT OF STATE** CAHON 01 OCT 18 PM 12: 41 P00000000650 DOCUMENT # 1. Corporation Name D.N.D. HOLDINGS, INC. Principal Place of Business Mailing Address 1005 MAIN STREET 1005 MAIN STREET DAYTONA BEACH FL 32118 DAYTONA BEACH FL 32118 If above addresses are incorrect in any way, line through incorrect information and enter correction below 3. New Mailing Office Address, If Applicable 2. New Principal Office Address, If Applicable Date Incorporated or Qualified
To Do Business in Florida 01/04/2000 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For City & State City & State Not Applicable \$8.75 Additional Fee required Zip Country Country CERTIFICATE OF STATUS DESIRED for a Certificate of Status 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each Title(s) City / State / Zip and/or Directors Officer and/or Director 3 **PSD** SROR; OFIR 1005 MAIN STREET **DAYTONA BEACH FL 32118** BarocH SROR VTD KROKOVER, ERAN 1005 MAIN STREET DAYTONA BEACH FL 32118 <u>300004662503---</u> -11/01/01--01035--025 \*\*\*\*150.00 \*\*\*\*150.00 8. Name and Address of Current Registered Agent. 9. Name and Address of New Registered Agent SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE 1005 CORAL GABLES FL 33134 Suite, Apt. #, Etc. Zip Code 10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN

🚁 1. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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D.N.D Holdings, Inc. 1005 Main Street Daytona Beach, FL. 32118 Ph.# (386) 255-2796 Fax # (386) 255-0558

10-14-01

Re: D.N.D Holdings, Inc. Doc.# P0000000650 FIN# 59-3616739

To Whom It May Concern,

Please accept my apologies for not been on top of things. I received a letter stating that I was late on my corporation renewal and that I had to pay \$750.00 but that was actually my first noticed received, so I spoke with someone on the phone regarding this problem and he told me adjust the amount to \$150.00. I was under the impression that I will get a notice on the mail with a return address and today, I received a document with a return address only the document has a penalty and the amount is a lot higher then the original amount that we discussed on the phone. So, please if you could be so kind as to adjust the amount to the amount discussed on the phone. Attached is a check of \$150.00 as we spoke on the phone. Sorry, for the inconvenience and thank you for your help.

Sincerely,

Baroch Sror, Pres.