


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
--------------------------------------	---	--

FILED

06 OCT 16 AM 7:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000052123

1. Corporation Name

Dream Logic Inc.

REINSTATEMENT

CR2E081 (12/05)

05-06

2. Principal Office Address 2045 EastBay Dr.		3. Mailing Office Address 2045 EastBay Dr.	
Suite, Apt. #, etc. Apt. #518		Suite, Apt. #, etc. Apt. #518	
City & State Largo, FL		City & State Largo, FL	
Zip 33771	Country USA	Zip 33771	Country USA
4. Date Incorporated or Qualified To Do Business in Florida 05-30-00		5. FEI Number 59-3648175	
		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
Randy Petrescue

Street Address (P.O. Box Number is Not Acceptable)
2045 EastBay Dr.

Suite, Apt. #, Etc.
Apt. #518

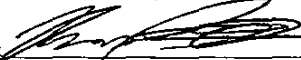
City
Largo

State
FL

Zip Code
33771

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



Date
10-02-06

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
PSTD	Randy Petrescue	2045 EastBay Dr.	Largo, FL 33771

300000448332
10/04/06--01006--019 **300.00

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 contained in Chapter 119, 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:



Randy Petrescue

10-02-06

727-580-9075

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

jc 10/20

To whom it may concern,

It has been brought to my attention that we have needed to reinstate the corporation "Dream Logic Inc."
However, we did not receive any notice or warning regarding the approaching dissolution in the year of our Lord 2005 A.D.

We ask that the reinstatement fee be waived.

Thank you and may God Bless you.

Sincerely,

A handwritten signature in black ink, appearing to read 'Randy Petrescue', with a long, sweeping horizontal line extending to the right.

Randy Petrescue