## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	2	A DEPAR Secretar VISION OF C	y of Sta		13	OCT -9 PH 4: 2	8	
DOCUMENT # P0000085276  1. Corporation Name								
DANIEL B. INVESTMENT, INC.					<b>8</b> 0 10/09	800252633208 10/09/1301039001 **800.00		
		Office Address ARRISON STREET			\$10,700	\$00252633208 10/09/13-dæ168-√0020 **400.00		
		Apt. #, etc. ITE 503			4. Date Inco	Date Incorporated or Qualified     To Do Business in Florida		
MIRAMAR, FL. HOL		LYWOOD, FL.		09/08/2000 5. FEI Numb		Applied For Not Applicable		
33025 U.S	3302	0	U.S		7 <del>-6</del>		3.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent Name  DANIEL BIEN-AIME  Street Address (P.O. Box Number is Not Acceptable)  1930 HARRISON STREET SUITE 503  Suite, Apt. #, Etc.  City  HOLLYWOOD  State  State  Zip Code  FL 33020					Non 607.0505 at 617.0503 5			
I, being appointed the registered agent of the above named corporation, am familiar with and accept the observation of Registered Agent  REGISTERED AGENT MUST SIGN					obligations of sect	Date 10/01/2013		
Names and Street Addresses of Each Officer     Titles     Name of	Street Address of Each			:h	City / Sta	ota / Zio		
Officers and/or Directo	Officers and/or Directors		Officer and/or Director  1930 HARRISON STREET;			HOLLYWOO	<u> </u>	
1			1930 HARRISON STREET #					
-								
REINS'	TATE	ME	NT		DCT 9 2013 R. HUNT			
10. E-mail Address: LM.JES/EL@GMAIL.COM  (To be used for future annual report notification)								

11. I certify that I am an officer of director or and 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that late information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/01/13 (786) 252-7728

> Date Daytime Phone #