PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

		1 FILED
CORPORATION	FLORIDA DEPARTMENT OF STATE	
REINSTATEMENT	Secretary of State DIVISION OF CORPORATIONS	03-0CT L PM 1:20
DOCUMENT# POLOCO	0033113	SECRETARY OF STATE TALLAHASSEE, PLORIDA
1. Corporation Name		
Direct Search of the US, INC.		
	•	REINSTATEMENT_03
2. Principal Office Address	3. Mailing Office Address	
2120 Tyler st.	2120 Tyler St. Suite, Apt. #, etc.	200023787492 10/14/0301063006 **150.00
		4. Date incorporated or Qualified To Do Business in Florida
City & State	City & State	5. FEI Number Applied For
HONYWOOD + L	HOLLY WOOD-, FL	52-2084380 Not Applicable
33020 USA_	33020 USA	CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status
, 7. Name and Address of Current Registered Agent		
Name Allen So	imuel	
Street Address (P.O. Box Number is Not Acceptable) 2/20 Tyler Street		
Suite, Apt. #, Etc.		
HOUVWOOD		State Zip Code FL 33020
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 ADam		bligations of section 607.0505 or 617.0503, F.S. Date 10/10/03
	REGISTERED AGENT MUST SIGN	
Name of	and/or Director (Florida nonprofit corporations must list at le Street Address of Eacl	<u> </u>
Officers and/or Directo	ors Officer and/or Oirecto	
P Allen Samu	uel 2120 Tyler.	St. Hollywood, FL 33020
1		
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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		an exemption under section 119.07(3)(i), F.S. The information indicated
28		10112 12 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
SIGNATURE: SIGNATURE AND TYPED OR I	PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	10/10/03 954 624 8550 Date Daytime Phone #

211115

To whom it may concern,

I am requesting a C- waiver as I did not receive an UBR for Direct Search of the US, Inc. Enclosed is a check in the amount of \$150.00.

Thank you,

Allen Samuel

President/CEO