PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATI Jim Smith Secretary of State DIVISION OF CORPORATIONS	FILED 02 OCT 17 PM 2: 13 SECRETARY OF STATE
DOCUMENT # P01000056376 1. Corporation Name		TALLAHASSEE, FLORIDA
DIRECT SOURCE INTERNATIONAL, FAC.		
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2. Principal Office Address	3. Mailing Office Address	$\mathcal{N}(\mathcal{O}_{\theta})$
3575 NE ZO7th ST	3575 NE 2074 ST Suite, Apt. #, etc.	· ·
SUITE B 20	SUITE BZO	4. Date Incorporated or Qualified To Do Business in Florida
City & State	City & State	6/7/200/
AVENTURA	AVENTURA	5. FEI Number Applied For S 2 - 2 3 2 1 7 3 3 Not Applicable
TIP Country T3180 USA	Zip Country	6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent		
CORPORATION SERVICES COMPANY		
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 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 E Officer and /or Direc	ach C' (C)
P GENE BORTNICK	3575 NE ZOTEN SUITE BZ	6T, 0 AUGUTURA, 7L, 33180
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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 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 Daylime Phone #		



Direct Source International

3575 NE 207th St Suite B20, Aventura, Fl. 33180 U.S.A. Telephone (305) 935-8989, Fax (305) 935-8989

October 15, 2002

To Whom It May Concern:

Please be advised that we received no notification regarding renewal from you office and are requesting the wavier of any late fees or penalties.

Sincerel

Zene Bortnick

President