PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

P01000097620 DOCUMENT #

1. Corporation Name

DESTIN RESORT RENTALS, INC.

Principal Place of Business

Mailing Address

STO CURACAO WAY -NICEVILLE FL 92978

216 CURAÇÃO WAY NICEVILLE Ft 92578 FILED

03 OCT 16 PM 3: 18

SEGLE MAY OF STATE TALLAHASSEE, FLORIDA

REINSTATEMENT 63
400023854394 10/16/0301039021 **150.00

					400023854394 10/16/0301033021 **150.00		
			ing Office Address, If Applicable		Date Incorporated or Qualified To Do Business in Florida 10/08/2001		
Suite, Apt. #, etc.			, etc.		5. FEI Number Applied For		
City & State City & State					E0_274047E		Not Applicable
		Destin	m FL Country		6 \$8.75 Additional Fee required		
Zip 32550 Country Zip 32				ISA	CERTIFICATE OF STATUS DESIRED for a Certificate of Status		
	and Street Addresses of Each Officer and			porations must list at lea	ast 3 directors)		
Title(s)	Name of Officers and/or Directors		Street Address of Each Officer and/or Director			City / State / Zip	
RD-	PALMER, ARVIE D×		316-OURACAD-WAY			NICE/ILLE-FL-62578	
VSTD	PALMER, ANDREW A JR	316 OURABAO WAY			CHCDVILLE PL 32578		
Presional	Presion Palmer, Awarew A Jr.			yshace Dr.		Destin, FL. 32550	
VIL. President	resort Aslmer, James A.			yshore Or. Jyshore Or.		Destin, FL. 32550	
			{	W.	Mar		
8. Name and Address of Current Registered Agent					9. Name and Address of New Registered Agent		
	EL & UTRERA, P.A. W 22ND ST. OOR		Street Address (F 350 Bay	Name ANDICIO A. Palmer Tr. Street Address (P.O. Box Number is Not Acceptable) 350 BA95 kore Dr. Suite, Apt. #, Efc.			
MIAMI	FL 33145		City State Zip Code FL 32550				
10. I, being Signature of Registered	Agent	lup	oration, am familia		bligations of Sec	tion 607.0505, F.S. or 617.0 Date	
	F						
11. I certify	that I am an officer or director or the rece	eiver or trustee ei	mpowered to exec	ute this application as p	provided for in ch	apter 607 or 617, F.S. I furth	er 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: While Mila M. ANDIEW A. Anhaci Jr. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/13/03 Date

<u>8506500114</u>

Destin Resort Rentals, Inc.

Phone: 850-650-0114 FAX: 850-837-6019

email: destinresortrentals@yahoo.com

Monday, October 13, 2003

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL. 32314

Dear Dept. of State

Destin Resort Rentals, Inc. did not receive the two prior (UBR) notices. Our mailing address is: P.O. Box 6635, Destin, FL. 32550.

Thank you,

Andrew A. Palmer Jr.

President

Destin Resort Rentals, Inc.