

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV 19 PM 12:53

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P01000113914

1. Corporation Name

DIGITAL HIFI, INC

2. Principal Office Address

27705 MULHOLLAND CT

Suite, Apt. #, etc.

WESLEY CHAPEL, FLORIDA

City & State

Zip

33543

Country

USA

3. Mailing Office Address

same

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT

02-03

**4. Date Incorporated or Qualified
To Do Business in Florida**

NOVEMBER 2001

5. FEI Number

59-375 4002

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

☒ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

JOHN KALABOKIAS

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

27705 MULHOLLAND CT

Suite, Apt. #, Etc.

WESLEY CHAPEL, FL 33543

City

State

FL

Zip Code

33543

400025082534

11/26/03--01070--014 ***308.75

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

REGISTERED AGENT MUST SIGN

Date 11/19/03

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
PRESIDENT	JOHN KALABOKIAS	27705 MULHOLLAND CT	WESLEY CHAPEL, FL 33543

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

11/19/03

Date

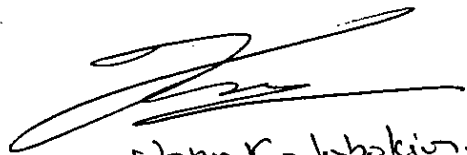
813-294-4434

Daytime Phone #

CR2E081 (10/02)

I John Kalabokias never received any
Annual Reports for Digital HiFi INC.
Document # P01000113914,

202



John Kalabokias.

11/19/03