

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 OCT 31 AM 9:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000045116**

1. Corporation Name

DTH WAV LOGISTICS INC.

Principal Place of Business

**2030 VAN BUREN ST
REAR WEST
HOLLYWOOD FL 33020**

Mailing Address

**2030 VAN BUREN ST
REAR WEST
HOLLYWOOD FL 33020**



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

**1150 Sussex Drive
Suite, Apt. #, etc. 1321**

City & State
N. Lauderdale FL
Zip
33068 Country
USA

3. New Mailing Office Address, If Applicable

**7154 N. University Dr
Suite, Apt. #, etc. 326**

City & State
Tamarac FL
Zip
33321 Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida

04/25/2002

5. FEI Number

02-0589286

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

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

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	HARRIS, DAMISI T	2030 VAN BUREN ST REAR WEST	HOLLYWOOD FL 33020
V	VILLVERDE, WANDA A	2030 VAN BUREN ST. REAR WEST	HOLLYWOOD FL 33020

900024335499
10/31/03--01068--021 **158.75

8. Name and Address of Current Registered Agent

**HARRIS, DAMISI T
2030 VAN BUREN ST
REAR WEST
HOLLYWOOD FL 33020**

9. Name and Address of New Registered Agent

Name

Damisi T. Harris

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

1150 Sussex Dr.

Suite, Apt. #, Etc.

1321

City

N. Lauderdale

State

FL

Zip Code

33068

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date

10/20/03

11. 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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/20/03 954-907-4109
Date Daytime Phone #

CR2E040 (7/03)

GiveMeDeals

deals all day, everyday!

7154 N. University Dr. #326

Tamarac, Florida 33321

Office: 954.721.9713

Fax: 954.720.8968



October 20, 2003

To Whom It May Concern:

This letter is to inform you that DTHWAV Logistics, Inc./dba GiveMeDeals, Inc. did not receive any prior Uniform Business Report notices from your agency. Please waive the \$600.00 reinstatement fee. If you have any questions, please feel free to call me at 954-727-5060 or 954-907-4109. Thank you for your cooperation.

Regards,

Wanda Villaverde Fernandez
Vice President