

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 NOV -9 AM 8:00

DOCUMENT # PO2000046485

1. Corporation Name
DC Graphics, Inc.

910 Collins Avenue
910 Collins Avenue

2. Principal Office Address
910 Collins Avenue

Suite, Apt. #, etc.
17

City & State
Miami Beach, Florida

Zip Country
33139 USA

3. Mailing Office Address
910 Collins Avenue

Suite, Apt. #, etc.
17

City & State
Miami Beach, Florida

Zip Country
33139 USA

REINSTATEMENT

03-04
MRD

4. Date Incorporated or Qualified
To Do Business in Florida 4/29/2002

5. FEI Number
043656795

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
Drew Christopher Heinrich

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

Suite, Apt. #, Etc.
17

City
Miami Beach, Florida

State Zip Code
FL 33139

900024100679
10/27/03 - 01/006 - 007 - \$50.00
11/9/04 01068 007 - \$150.00

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

Drew C. Heinrich

REGISTERED AGENT MUST SIGN

Date 11/02/04

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
Mr. D.	Drew C. Heinrich	910 Collins #17	Miami Beach, Florida 33139

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:

Drew C. Heinrich Drew C. Heinrich

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

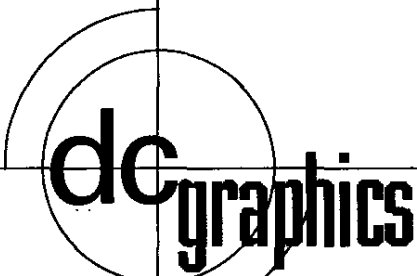
Date

11/2/04 305-674-0118

Daytime Phone #

CR2E081 (01/04)

292



the power of **imagination** | the technology to **create** | dcgraphics

tel 11.02.04

305 Florida Department of State:

674 I did not receive the original/second notice uniform business report for
2003. (UBR)

0118

I also did not receive the original uniform business report for 2004. (UBR)
Attached is the reinstatement fee for 2004.

fax

Sincerely,

305

A handwritten signature in cursive script that reads 'Drew Christopher'.

695

1614

Drew Christopher
DC GRAPHICS, INC.

563
0224

828
3010
2937