## 2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED Oct 21, 2004 Secretary of State

DOCUMENT# P02000068990  Entity Name: DEW HOLDINGS, INC.				Secretary of State	
•					
Current Principal Place of Business:			New Principal Place o	f Business:	
1525 A1A S INDIALAN	STE 407 TIC, FL 32903				
Current Mailing Address:			New Mailing Address	:	
1525 A1A S INDIALAN	STE 407 TIC, FL 32903				
FEI Number:	38-3653489	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
BICKFORD, ROBERT E ESQ 2101 SOUTH WAVERLY PLACE MELBOURNE, FL 32901 US			FISK, ERNA M PD 1525 N. HWY A1A 407 INDIALANTIC, FL 3290	1525 N. HWY A1A	
	named entity see of Florida.	submits this statement for the p	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE: ERNA M. FISK				10/21/2004	
	Electron	ic Signature of Registered Age	nt	Date	
		3(2)(b), F.S., the corporation did not g Trust Fund Contribution ( ).	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () FISK, ERNA 1525 A1A STE INDIALANTIC, F		Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	VD () BRUCKNER, W 1525 A1A STE INDIALANTIC, F	407	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	TS () BRUCKNER, DA 2215 KENT STE PALM BAY, FL	REET NE	Title: ( Name: Address: Citv-St-Zip:	) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ERNA M. FISK PD 10/21/2004