


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 04 MAR -4 PM 3:53

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **P02000119785**
 1. Corporation Name
D+S Fitness Enterprises

REINSTATEMENT 03-04

800028938598
 03/04/04--01031--007 **150.00
 800028938598
 02/17/04--01030--018 **150.00

2. Principal Office Address
133 NE 20th Ct
 Suite, Apt. #, etc.

3. Mailing Office Address
 Suite, Apt. #, etc.

City & State
Wilton Manors FL

City & State

Zip Country Zip Country
33305 USA

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number
76-0718986

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
David Michael Hohimer Jr

Street Address (P.O. Box Number is Not Acceptable)
133 NE 20th Ct

Suite, Apt. #, Etc.

City State Zip Code
Wilton Manors FL 33305

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 **[Signature]** Date **2/9/04**
 REGISTERED AGENT MUST SIGN

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
PT	David M. Hohimer Jr	133 NE 20th Ct	Wilton Manors, FL 33305
VS	Stephen E Terrell	133 NE 20th Ct	Wilton Manors, FL 33305

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]** Date **2/9/04** Daytime Phone # **954-630-2600**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (07/04)

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February 9, 2004

To Whom It May Concern:

This letter is being written in response to dissolution of the corporation for D & S Fitness Enterprises Inc. The business was incorporated in November of 2002, however no annual report documents were received by the corporate offices in 2003 so that they could be filed in a timely fashion to prevent dissolution. Enclosed is the required corporate reinstatement document along with a check for \$150.00. This letter is requesting a waiver of the reinstatement fee due to non receipt of the annual report.

Please forward me any necessary documents including prior annual reports so that they may be completed and submitted promptly. Thank you for your assistance in this manner.

Sincerely,

David M. Hohimer Jr., DMD, CSCS
President
D & S Fitness Enterprises Inc.