

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 -9 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000126012

1. Corporation Name

D.S.I. DIRECT, INC.

Principal Place of Business Mailing Address
7300 N FEDERAL HWY STE 105 7300 N FEDERAL HWY STE 105
BOCA RATON FL 33487 BOCA RATON FL 33487



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

2. New Principal Office Address, If Applicable: Same
3. New Mailing Office Address, If Applicable: Same
4. Date Incorporated or Qualified To Do Business in Florida: 11/27/2002
5. FEI Number: 55-0816563
6. CERTIFICATE OF STATUS DESIRED [] \$8.75 Additional Fee required for a Certificate of Status

Table with 4 columns: Title(s), Name of Officers and/or Directors, Street Address of Each Officer and/or Director, City / State / Zip. Includes entries for Kenneth Schwartz and Jennifer Whalen.

100023670591
10/09/03--01067--009 **150.00

8. Name and Address of Current Registered Agent: FILINGS, INC., 3732 N.W. 16TH STREET, FT. LAUDERDALE FL 33311-4132
9. Name and Address of New Registered Agent: Name: Same

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] Date: 10-8-03
REGISTERED AGENT MUST SIGN

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)(l), 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] Kenneth Schwartz Date: 10-8-03 561-999-0110

CP2ED040 (7/03)



Debt Solutions, Inc.

THE EVOLUTION OF FINANCIAL SOFTWARE

October 8, 2003

Glenda Hood-Secretary of State
Division of Corporations
Annual report/reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

Dear Ms. Hood,

We recently received a notice of administrative dissolution due to non-payment of 2003 corporation annual reports for both Debt Solutions, Inc. and DSI Direct, Inc. According to the records of our accountants, lawyers and our corporate office the annual report was never received for either of the aforementioned corporations. Oddly, the information that you have for the principle place of business and registered agent is accurate. In addition, we have been at the same location for over 3 years without an incident similar to this. The fact that we did not receive either of these reports leads me to believe that they must not have been sent out properly. In any event enclosed please find checks in the amount of \$150 for Debt Solutions, Inc. and DSI Direct, Inc. as instructed by your automated service. We will continue to investigate any circumstances that would have possibly precluded us from receiving important documents such as these so that we may avoid any such incident in the future. If you should have any questions or require any further information please do not hesitate to call me at (561) 999-0110.

Very Truly Yours,

Kenneth Schwartz
President