PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood Secretary of State

DIVISION OF CORPORATIONS

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P02000126012

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1. Corporation Name

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03 OCT -9 PM 3: 12

					IM-				
Principal Place of Business Mailing Addr				ress					
· ·		eral Hwy Ste 105							
If above	addresses are incorrect in any way, line	through incorrect i	information a	nd enter correction	below.				
New Principal Office Address, If Applicable 3. New Mai			ling Office Address, If Applicable		Date Incorporated or Qualified To Do Rivings in Florida				
Suite, Apt. #, etc. Suite, Apt. #		Suite, Apt. #			To Do Business in Florida 11/27/2002				
		City & State						Applied For	
					55 - 0816563 Not Applicable				
Zip Country Zip		Zip	Country		CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee require for a Certificate of Status				
7. Names	and Street Addresses of Each Officer	and/or Director (Flo	orida nonprof	it corporations mus	t list at lea	ast 3 directors)			
Title(s)			Street Address of Each Officer and/or Director				City / State / Zip		
D	SCHWARTZ, KENNETH			7300 N FEDERAL HWY STE 105			BOCA RATON FL 33487		
D	WHALEN, JENNIFER	NHALEN, JENNIFER		6619 N CEDAR STREET STE 101			SPIKANE WA 99208		
									
						100 10/09/	002367 03-010670	0591 09 **1	50.00 [
			-			 			
B. Name and Address of Current Registered Agent						9. Name and	Address of New Regis	tered Agent	
				Name	SAM	<u>. </u>			
	GS, INC.			Street A			is Not Acceptable)		
3732 N.W. 16TH STREET FT. LAUDERDALE FL 33311-4132				Suite, Apt. #, Etc.					
				City				State Zip	Code
10. I, beir	ng appointed the registered agent of the	above named corpo	oration, am fa	amillar with and acc	ept the of	bligations of Secti	on 607.0505, F.S. or 61		
Signature Registere	of d Agent		: ' (Date 10 - 9	3-03	,
		REGISTERED AC	SENT MUST	SIGN					
this rei	y that I am an officer or director or the re instatement application, the reason for converted and I	lissolution has been	eliminated,	the corporate name	satisfies	the requirements	of section 607.0401 or	617.0401, F	.S., that all fees



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