


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2

**CORPORATION REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

051000-2 TIME: 20

DOCUMENT # **P04000020506**

1. Corporation Name  
**DS PACTO INC**

**REINSTATEMENT**

CR2E081 (12/05)

05-06

2. Principal Office Address <b>526 ELBRIDGE PL</b>		3. Mailing Office Address <b>526 ELBRIDGE PL</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <b>KISSIMMEE, FL</b>		City & State <b>KISSIMMEE, FL</b>	
Zip <b>34758</b>	Country <b>OSCEOLA</b>	Zip <b>34758</b>	Country <b>OSCEOLA</b>

4. Date Incorporated or Qualified To Do Business in Florida **01/30/2004**

5. FEI Number **200676872**

6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name **CAROLINE LARSON**

Street Address (P.O. Box Number is Not Acceptable)  
**8818 COMMODITY CIRCLE**

Suite, Apt. #, Etc.  
**SUITE # 40**

City **ORLANDO** State **FL** Zip Code **32819**

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 **Carabannon** Date **10 / 27 / 2006**

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
DP	JOSE R. VILLALOBOS	526 ELBRIDGE PL	KISSIMMEE, FL, 34758
DVP	EVELYN ORELLANA	526 ELBRIDGE PL	KISSIMMEE, FL, 34758

200081475532  
11/02/06 01037 009 \*\*300.00

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 contained in Chapter 119, 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: **X [Signature]** Date **10 / 27 / 2006**

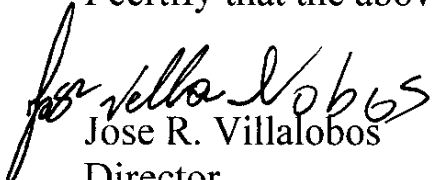
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

20fz

To: Division of Corporation  
From: DJ PACTO INC  
Date: 10/27/2006

This letter is to state that we did not receive a renewal notice because we moved in JUNE 2005.

I certify that the above is true.

  
Jose R. Villalobos  
Director