2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000087668

City-St-Zip:

Entity Name: DIRECT SOLUTIONS 4 U. INC.

FILED Nov 29, 2006 Secretary of State

Entity Nan	1e: DIRECT SOLU	TIONS 4 U, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
	ERKELEY AVE UCIE, FL 34986	US					
Current Mailing Address:			New Maili	New Mailing Address:			
	ERKELEY AVE .UCIE, FL 34986	US					
FEI Number:	20-1210250 FE	Number Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	ı	
Name and	Address of Curre	nt Registered Agent:	Name and	Name and Address of New Registered Agent:			
	ALEX ERKELEY AVE UCIE, FL 34986	US					
The above in the State		nits this statement for the p	urpose of changing i	ts registered	office or registered agent, or b	oth,	
SIGNATUR	E: ALEX ALMIRO	N					
	Electronic Si	gnature of Registered Age	ent	Date			
), F.S., the corporation did no st Fund Contribution ().	t receive the prior notic	e.			
	AND DIRECTOR	` '	ADDITION	S/CHANGE	S TO OFFICERS AND DIREC	TORS:	
Title: Name: Address: City-St-Zip:	P () Dele ALMIRON, ALEX 114 N.W. BERKELEY PORT ST LUCIE, FL	/ AVE	Title: Name: Address: City-St-Zip:	(() Change() Addition		
Title: Name: Address: City-St-Zip:	VP () Dele ALMIRON, MARTA 114 N.W. BERKELE PORT ST LUCIE, FL	/ AVE	Title: Name: Address: City-St-Zip:	GONZALEZ, 4486 GARDE			
Title: Name: Address:	() Dele	te	Title: Name: Address:	T (PAEZ, DANIE 18430 40TH.			

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

City-St-Zip: LOXAHATCHEE, FL 33470 US

SIGNATURE: ALEX ALMIRON P 11/29/2006