

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000063270

FILED  
Sep 19, 2006  
Secretary of State

Entity Name: DA DOMINICCI INTERNATIONAL, INC.

## Current Principal Place of Business:

8277 DEMING DR. SUITE-1  
ORLANDO, FL 32825

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 72119  
ORLANDO, FL 328721199

## New Mailing Address:

FEI Number: 55-0896068

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DOMINICI, ADALGISA  
8277 DEMING DR. SUITE-1  
ORLANDO, FL 328721199 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ADALGISA DOMINICCI

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PM ( ) Delete  
Name: DOMINICI, ADALGISA  
Address: 8277 DEMING DR. SUITE-1  
City-St-Zip: ORLANDO, FL 32825

Title: VP ( ) Delete  
Name: ARROYO, JOSE M  
Address: 8277 DEMING DR. SUITE-1  
City-St-Zip: ORLANDO, FL 32825

Title: SVP (X) Delete  
Name: DOMINICI, MARCO  
Address: 8277 DEMING DR. SUITE-1  
City-St-Zip: ORLANDO, FL 32825

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DOMINICI, ADALGISA  
Address: 8277 DEMING DR. SUITE-1  
City-St-Zip: ORLANDO, FL 32825

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: ADALGISA DOMINICCI

P

09/19/2006

Electronic Signature of Signing Officer or Director

Date