PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		
DOCUMENT # P96000018370 1. Corporation Name			98 DEC 28 PM 2: 50
Direct Telemarketing, Inc.			SECRETARY OF STATE TALLAHASSEE, FLORIDA
Principal Place of Business 10001 NW 50th Street Sunrise, FL 33351 If above addresses are incorrect in any way, line through incorrect information and enter co		51	1000027270411 -12/30/9801088015 *****908.75 *****900.00
2. New Principal Office Address, if Applicable 3814 NW 126th Avenue	incipal Office Address, if Applicable IW 126th Avenue 3. New Mailing Office Address, if Applicable 3814 NW 126th Avenue		Date Incorporated or Qualified To Do Business in Florida 2/26/96
Suite, Apt. #, etc. Coral Springs, FL	Suite, Apt. #, etc. City & State Coral Springs, FL		5. FEI Number Applied For
Zip Country 33065 U.S.A.	Zip Cou 33065 C	ntry	6. CERTIFICATE OF STATUS DESIRED (S8.75 Additional Fee required for a Certificate of Status)
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each			
Title(s) and/or Directors	3 (Do NOT	Officer and/or Director Use Post Office Box N	r City / State / Zip Numbers) 4
P/D Marvin Chanes 3814 NW 126		26th Avenue	Coral Springs, FL 33065
REINSTATEMENT 92-98 T3 12/29/98			
Name and Address of Current Registered Agent Name			9. Name and Address of New Registered Agent
Marvin Chanes 10001 NW 50th Street Sunrise, FL 33351		Marvin (Street Address (F	P.O. Box Number is Not Acceptable) _126th_Avenue
10. I being appointed the registered apent of the abo	de ramed atmoration an familiar	Coral Sp	
10. I, being appointed the registered agent of the above planed or poration, an familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN Date 12/2/5/			
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes X No C (See other side for information on intangible tax.)			
12. 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 filling 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)(i), 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: Marvin Chanes 12/2/9/ 954-255-960 or Daylime Phone #			