

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FULLY  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

09 NOV 16 PM 4:56

DOCUMENT # P960000 19006

1. Corporation Name

DC Ventures, Incorporated.

B 11/16/09  
**REINSTATEMENT 08-09**

300161831933  
10/16/09--01037--004 \*\*\$150.00  
CH2E081 (12/08)

2. Principal Office Address - No P.O. Box #

18671 Collins Ave

3. Mailing Office Address

18671 Collins Ave

Suite, Apt. #, etc.

#2704

Suite, Apt. #, etc.

#2704

City & State

Sunny Isles Beach, Fla

City & State

Sunny Isles Beach, Fla

Zip

33160

Country

USA

Zip

33160

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

2/28/1996

5. FEI Number

650671734

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Drew Wolf

Street Address (P.O. Box Number is Not Acceptable)

18671 Collins Ave #2704

Suite, Apt. #, Etc.

City

Sunny Isles Beach

State

FL

Zip Code

33160-

☒ The reinstatement fee is imposed, except in  
circumstances which the entity did not receive  
the prior notices. By checking this box, you  
are certifying the prior notices were not  
received and requesting the reinstatement  
fee be waived.

300161831933  
10/16/09--01037--004 \*\*\$150.00

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

*Drew Wolf*

Date 10/15/09

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
Pres.	Drew Wolf	18671 Collins Ave #2704	Sunny Isles Beach Fla
V. Pres.	Drew Wolf	18671 Collins Ave #2704	" 33160
Sec.	Quetcheu Wolf	18671 Collins Ave #2704	Sunny Isles Beach, Fla
Treas.	Quetcheu Wolf	18671 Collins Ave #2704	Sunny Isles Beach, 33160

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:

*Daniel Presaldi*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/15/09 305-5228145  
Date Daytime Phone #