

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION FOR REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

FILED

97 DEC 22 AM 10:32

SECRETARY OF STATE  
 TALLAHASSEE FLORIDA

DOCUMENT # **P96000099457**

1. Corporation Name

**D & B HOLDINGS INTERNATIONAL, INC.**

Principal Place of Business

8601 4TH ST. NORTH, SUITE 301  
 ST. PETERSBURG FL 33702

Mailing Address

8601 4TH ST. NORTH, SUITE 301  
 ST. PETERSBURG FL 33702

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

12/10/1996

5. FEI Number

Applied For  
 Not Applicable

6. CERTIFICATE OF STATUS DESIRED

**\$0.75 Additional Fee required for a Certificate of Status**

**REINSTATEMENT** *New*

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	Burnell Hoekstra	8601 4th St. No <i>Ste 301</i>	St Petersburg FL 33702
P	Burnell Hoekstra	8601 4th St. No <i>Ste 301</i>	St Petersburg FL 33702

200002381812-1  
 -12/24/97-01038-013  
 \*\*\*750.00 \*\*\*750.00

8. Name and Address of Current Registered Agent

**BARTSCH, DEREK**  
 8601 4TH ST. NORTH, SUITE 301  
 ST. PETERSBURG FL 33702

9. Name and Address of New Registered Agent

Name **X Burnell Hoekstra**  
 Street Address (P.O. Box Number is Not Acceptable) **8601 4th St No Suite 301**  
 Suite, Apt. #, Etc. **Suite 301**  
 City **St Petersburg** State **FL** Zip Code **33702**

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent *X Burnell Hoekstra*  
 THE REGISTERED AGENT MUST SIGN

Date **12/18/97**

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes  No

(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 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 under section 119.07(3)(b), 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: *Burnell Hoekstra*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **12/10/97** 803 570 8555  
 Daytime Phone #

CR25040 (8/97)