PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 182

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 FEB -5 AM 8:00

DOCUMENT # P97000055117

1. Corporation Name
D. M. WARREN CORP.

500028660565
02/12/04--01037--022 **300.00

REINSTATEMENT 03-04 MRD

2. Principal Office Address	3. Mailing Office Address
562014 ARBOR CLUB WAY	- SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: BOCA RATON, FL	City & State
Zip: 33433 Country: USA	Zip Country

4. Date Incorporated or Qualified To Do Business in Florida: 6/23/97

5. FEI Number: 65-0763027 ☐ 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: STEVEN SILVERMAN

Street Address (P.O. Box Number is Not Acceptable): 562014 ARBOR CLUB WAY

Suite, Apt. #, Etc.:

City: BOCA RATON State: FL Zip Code: 33433

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: Steven M Silverman Date: 1/29/04
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
P	STEVEN SILVERMAN	562014 ARBOR CLUB WAY	BOCA RATON, FL 33433
S	"		
T	"		
D	"		

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 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: Steven Silverman 1/29/04 561-392-6679
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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D.M.WARREN CORP.

DIV. OF CORPORATIONS
PO BOX 6327
TALLAHASSE, FL 32314

1/29/04

To Whom it may Concern,

I never recieved the Document for Annual Report for 2003, As a result the Corp was dissolved. Enclosed Please find a completed Reinstatemalt form and a check for $300 for 2003 and 2004 Annual Reports.

Sincerely,

Steven M. Silverman, Pres.

Steven M Silverman

562014 ARBOR CLUB WAY
BOCA RATON, FL 33433

7040 W. Palmetto Park Rd. Bldg. 4, Suite 403 • Boca Raton, Florida 33433 • USA
Tel: 561.392.4422 Fax: 561.362.6121 • Email: dmwarren@aol.net