

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  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

01 OCT 11 AM 11:55

**DOCUMENT # P97000062263**

1. Corporation Name  
**D & Y International Enterprise, Inc.**

Principal Place of Business      Mailing Address

**2101 Johnson St. #708      2101 Johnson St. #708**  
**Pembroke Pines, FL 33029      Pembroke Pines, FL 33029**

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

2. New Principal Office Address, if Applicable <b>911 NW 209 Av.</b>		3. New Mailing Office Address, if Applicable <b>911 NW 209 Av.</b>		4. Date Incorporated or Qualified To Do Business in Florida <b>July 1997</b>	
Suits, Apt. #, etc. <b># 122</b>		Suits, Apt. #, etc. <b># 122</b>		6. FEI Number <b>65-0768578</b>	
City & State <b>Pembroke Pines, FL</b>		City & State <b>Pembroke Pines, FL</b>		Applied For <input type="checkbox"/> NOT Applicable	
Zip <b>33029</b>		Zip <b>33029</b>		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	

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
SD	William Beltran	<del>15132 NW 7th Court</del> <b>911 NW 209 Ave #122</b>	<del>Pembroke Pines, FL 33028</del> <b>Pembroke Pines FL 33029</b>

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
William Beltran 15132 NW 7th Court Pembroke Pines, FL 33028		Name <b>William Beltran</b> Street Address (P.O. Box Number is Not Acceptable) <b>15132 NW 7th Court</b> Suits, Apt. #, Etc. City <b>Pembroke Pines</b> State <b>FL</b> Zip Code <b>33028</b>	

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: *William Beltran*      Date: 10/02/01

REGISTERED AGENT MUST SIGN

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)(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: *William Beltran*      **William Beltran**      Date: 10/02/01      (954) 559-0807

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

**DZY International Enterprise, Inc.**  
**911 NW 209 Avenue #122**  
**Pembroke Pines, FL 33029**

Department of State  
Division of Corporation

October 8, 2001

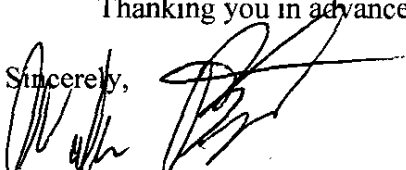
Ref.: Abatement of penalties

Dear Sir or Madam:

Please abate the above mentioned penalties since for the last year I have been in and out of hospitals. My mailing address has also changed, and I did not receive the notice.

Thanking you in advance.

Sincerely,

  
William Beltran