	PLEA	SE READ A	ALL INS	TRUCTIONS			ING THIS FORM.	$\bigcap$
API	PLICATION FOR		FLORIE	A DEPARTME	N O STATE			
REINSTATEMENT			Secretary of State  DIVISION OF CORPORATIONS			FILED		
	JMENT #	S3140	1			99 NOV 1 9 AM 10: 38		
1 Corporation Name  DESIGNERS ROW UNLIMITED, INC.						SECRETARY OF STATE TALLAHASSEE, FLORIDA		
							IMPLANASSEE, PE	JRIVA
DESIA 1280 SUNR	thers Rus 1 W. Sunlu USC FL 33:	se (blod*44) 323	1 12801 WEST SUNRISE BOULEVARD SUITE 441 SUNRISE FL 33323 US					
	ddresses are incorrect in respat Office Address, th		ugh incorrect information and enter correction below.  3. New Mailing Office Address, If Applicable			Date Incorporated or Qualified     To Do Business in Florida		
Suite, Apt	#. etc		Suite, Apt. #, etc.			02/13/1991  5. FEI Number   Applied For		
City & State			City & State			65-0267460 Not Applicable		
Zip	Country		Zıp	Countr	У	*		dditional Fee required Certificate of Status
7. Names	and Street Addresses of Na	Each Officer and/o	or Director_(FI	Str	eet Address of Each	: ¹	1	
Title(s)			Off		SE BLVD		4 City / State / Zip SUNRISE FL	
PD ASPURU, MARIA P				12801 W SUNRIS				
					ř		*****150.00 ****150.00	
							L	8
8. Name and Address of Current Registered Agent  9. Name and Address of New Registered Agent  Name  AS PURU MARIA P.								P . (68)
						SPURU MARIA T.  P.O. Box Number is Not Acceptable)  W. S. U. NR ISE Blud		
12801 W. SUMRISE Blood, #441 Street Address 1280/ SUMRISE FL. 33323 Suite. Apt. #. EUNRIS						E 71 33323		
					City		FL	p Code
Segrature of Regulation 1	g appointed the registered the Agent Man	Park		oration, am familiar w GENT MUST SIGN	rith and accept the o	bligations of Sect	ion 607.0505, F.S.  Date <u>Usf</u> , 27	1955
this rein owed b	statement application, t	ne reason for disso een paid and the n	ution has bee ames of indivi	n eliminated, the corpo duals listed on this for	orate name satisfies m do not qualify for	the requirements an exemption un	apter 607 or 617, F.S. I further cert, of section 607.0401 or 617.0401, der section 119.07(3)(i), F.S. The i	F.S., that all fees
SIGNAT	TURE: Mar	AND TYPED OR PRIM	TEDNAME OF	SIGNING OFFICER OR	DIRECTOR		Oct. 27, 199	S Phone #
	MART	A P.	As	SPURY.		_		

## - DO NOT REMOVE -





Florida Department of State Division of Corporations Reinstatement Department 409 East Gaines Street Tallahassee, Florida 32399

Dear Reinstatement Department:

As per my conversation with your office last week, we are enclosing our check for \$150.00 to cover the annual fees for Designers Row Unlimited, Inc. located at 12801 West Sunrise Blvd. Suite 441- Sunrise, Florida 33323-4004.

As previously discussed with your representative, the first and second report were never received at our location.

We thank you and the Department for your kind and prompt service.

Sincerely yours,

Maxia Aspuru,

President