PLEASE READ ALL INS	TRUCTIONS BEFORE	JAMPIETING INISE JOM
APPLICATION FOR REINSTATEMENT PLEASE READ ALL INSTRUCTIONS BEFORE CONTINUES CORPORATIONS PLEASE READ ALL INSTRUCTIONS BEFORE CORPORATIONS PLEASE READ ALL INSTRUCTIONS BEFORE CORPORATIONS PROPERTY OF CORPORATIONS		at the street of
DIVISION OF CORPORATIONS		- 98 DEC -4 AM 10: 36
1. Comparison Name		SECRETARY OF STATE
Direct Credit Research Corp.		TALLAHASSEE, FLORIDA
Principal Place of Business Mailing Abd	ress	1
Clearup der FL 327/4/ Clearubler FC		05
Clearwater, FC 33764 /Cl	earwater, FC	
If above addresses are incorrect in any way, line through igcorrect		
N/A (000)	ling Office Address, If Applicable	4. Date Incorporated or Qualified To Do Business In Florida 9 / 24/9 Z
Suite, Apr. #, etc. Suite, Apr. # City & State City, & State	55	5. FEI Number Applied For
Zip Country Zip	Cwater, FC	6. CERTIFICATE OF STATUS DESIRED (See a Contificate of Status)
7. Names and Street Addresses of Each Officer and/or Director (Fig.	- <u></u>	ioi a certificate di Status
Title(s) Name of Officers and/or Directors	Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box I	City / State / Zip
P/T Wren F. Tuthill	1897 Harmony D	
VP/s Allen F. Tuthill, Jr	. 1897 Harmony	Clearwater, FL 33756) Dr Clearwater, FL 33756
		4000027056741 -12/08/9801084009 ****150.00 ****150.00
		- \ \
		10/10
8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent
Allen F. Tuthill Name Wren F. Tuthill		
Allen F. Tuthill wood Bypass Dr #105 Cleanwader, Fl 33764 Name of F. Tuthill Street Address (P.O. Box Number is Not Acceptable) Cleanwader, Fl 33764		
Cleanary M 33	5764 Bityn (State Zip Code
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 Usen 4 Justification Date 1/30/98		
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No U		
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 filling 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: Usen J. J. H. Wen F. Tuthill, 1/19/98 813-724-9555 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Phone #		