

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

2016 DEC -9 AM 10:40

**DOCUMENT #** F14000003525

1. Corporation Name

DATA SEARCH COLLECTION, INC

2. Principal Office Address - No P.O. Box #

85 NE LOOP 410

Suite, Apt. #, etc.

SUITE 575

City & State

SAN ANTONIO

Zip

78216

Country

UNITED STATES

3. Mailing Office Address

PO BOX 461289

Suite, Apt. #, etc.

City & State

SAN ANTONIO, TX

Zip

78246

Country

UNITED STATES

DEC -9 2016

CR2E081 (11/10)

L BERGER

4. Date Incorporated or Qualified  
To Do Business in Florida

10/01/2004

5. PET Number

742013959

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

CT CORPORATION SYSTEM

Street Address (P.O. Box Number is Not Acceptable)

1200 SOUTH PINE ISLANDS ROAD

Suite, Apt. #, Etc.

City

PLANTATION

State

FL

Zip Code

33324

400298128124

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

*Nicole Chouinard*

Date 12/8/2016

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
PRESIDENT	MARY LOU SAN MARCO	224 TAVISH TRAIL	AUSTIN, TX 78738
V.P.	WILLIAM SAN MARCO	2530 WALLABY CIR.	NEW BRAUNFELS, TX 78132
<b>REINSTATEMENT</b>			
2015-2016			

10. E-mail Address: Bsanmarco@datasearchinc.com

(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

*William San Marco*

William San Marco

12/8/16

210-340-3990

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

# CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

850-508-1891 (cell)

Date: 12/12/10  
ACCT. I2016000072

*Eric D*

Name:	Data Search Collection, Inc.
Document #:	
Order #:	10274541

Certified Copy of Arts & Amend:			
Plain Copy:			
Certificate of Good Standing:			
Apostille/Notarial Certification:		Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified:
	Plain: <i>(re instatement)</i>
	COGS: ,

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ 900

Thank you!

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16 DEC 12 PM 12:01  
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