

2003

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 DEC 29 AM 10:28

SECRETARY OF STATE
TALLAHASSEE FLORIDA

REINSTATEMENT 03

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # PG8000026172

1. Corporation Name

Florida Funding & Equity Corp.

2. Principal Office Address

2334 S.W. 67th AVE

Suite, Apt. #, etc.

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Same

Zip

33155

Country

Dade

Zip

Same

Country

Same

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

650821427

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$6.75 Additional Fee required
for a Certificate of Status

900025307579
12/08/03--01013--012 **150.00

7. Name and Address of Current Registered Agent

Name

Carlos Reyes

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

14902 S.W. 80th AVE

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33193

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

REGISTERED AGENT MUST SIGN

Date 12/16/03

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
Director	Carlos Reyes	14902 S.W. 80 th St. #208	Miami FL 33193

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)(l), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/16/03

Date

305 269-0588

Daytime Phone #

CPRE01 (3-99)

Fusion Mortgage Corp.

2334 SW 67th Ave

Miami, Fl. 33155

Phone: 305 269-0088 Fax: 305 269-0087

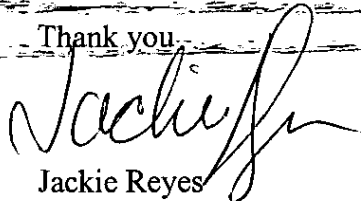
December 3, 2003

Re: 650821427

To Whom It May Concern:

Hereby Fusion Mortgage Corp. is writing this letter to the Division of Corporation Dept. We have realized that our company has been inactive seen Sep. 2003. Our accounting relocated her office and we had sent her the check for the renewal. The checks got-lots-in the mail, so we had to put a stop payment on the checks. We are sending the bank statement showing the stop payment on them, so that you have prove. Please accept our apology in this matter. We have enclosed a renewal form with the check to renew our company. Thank you for your attention.

Thank you



Jackie Reyes
Processor