

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. *page 1 of 2*

APPLICATION
FOR



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **591699**

1. Corporation Name

SERVICE MORTGAGE CORPORATION

Principal Place of Business

Mailing Address

10511 N KENDALL DRIVE
C-201
MIAMI FL 33176
US

10511 N KENDALL DRIVE
C-201
MIAMI FL 33176
US

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/31/1978

5. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	SANCHEZ, RICHARD	10511 N KENDALL DR STE C-201	MIAMI FL 33176
STD	SANCHEZ, MAGALY	10511 N KENDALL DR STE C-201	MIAMI FL 33176
AS	RODRIGUEZ, ADA	10511 N. KENDALL DR. C-201	MIAMI FL 33176

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-10/30/01--01055--014
*****150.00 *****150.00
01 4/22 178

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

SANCHEZ, RICHARD
10511 N KENDALL DRIVE SUITE C-201
MIAMI FL 33176

Name

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

Suite, Apt. #, Etc.

City

State
FL

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

[Signature]
REGISTERED AGENT MUST SIGN

Date

10/15/01

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., 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/15/01 (305) 274-3197

CR2ED40 (8/01)

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AMIC

America's Mortgage Choice

10511 N. Kendall Drive, Suite C-201 • Miami, FL 33176
Business (305) 274-3197 • Fax (305) 274-9323

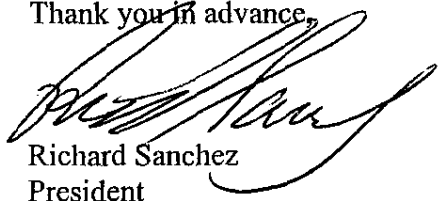
October 15, 2001

To Whom It May Concern:

On October 15, 2001 this notice was put on my desk and I almost had a Heart attack as for I am always very punctual with all my payments and this is one of the most important payments that I make yearly. Service Mortgage Corp. has been active since 1978 with the Department of State.

I respectfully request if you can please waive the penalty fee, since we did not receive the 2001 uniform Business Report in the mail, and had know idea that it was time to pay again.

Thank you in advance,



Richard Sanchez
President