



PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

05 MAY 20 PM 2:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>CORPORATION REINSTATEMENT</b>				<b>FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT #</b> F01000004356					
<b>1. Corporation Name</b> One Source Mortgage Corporation of New Jersey					
<b>2. Principal Office Address</b> 3 University Plaza Suite, Apt. #, etc. 502 City & State Hackensack, NJ Zip 07601 Country U.S.A.			<b>3. Mailing Office Address</b> Suite, Apt. #, etc. City & State Zip Country		
			<b>4. Date Incorporated or Qualified To Do Business in Florida</b> 8/16/01		
			<b>5. FEI Number</b> 22-3546822		<b>Applied For</b> Not Applicable
			<b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status		
<b>7. Name and Address of Current Registered Agent</b>					
Name Florida Compliance					
Street Address (P.O. Box Number is Not Acceptable) 2331 Hansen Place					
Suite, Apt. #, Etc.					
City Tallahassee				State FL	Zip Code 32301
<b>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.</b>					
Signature of Registered Agent _____ Date _____					
REGISTERED AGENT MUST SIGN					
<b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b>					
<b>Titles</b>	<b>Name of Officers and/or Directors</b>	<b>Street Address of Each Officer and/or Director</b>	<b>City / State / Zip</b>		
Pres.	Shawn Miller	5 Huyler Landing Road	Cresskill, NJ 07626		
Secy	Susanne Miller	5 Huyler Landing Road	Cresskill, NJ 07626		
			05/20/05--01056--007 **300.00		
<b>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)(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.</b>					
<b>SIGNATURE:</b> 		5/13/05		201-300-1104	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

CORP/STAT (01/05)

**ONE SOURCE MORTGAGE CORPORATION**  
**RESIDENTIAL & COMMERCIAL MORTGAGES**

May 13, 2005

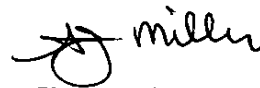
Department of State  
409 E. Gaines Street  
Tallahassee, FL 32399

To Whom It May Concern:

We never received our annual report in the mail. We think that when we moved to our new address in April 2005, some of our mail was not forwarded.

Please call me if there is anything I would have to do in order to correct this situation. Enclosed is \$300 for 2004 & 2005. Thank you for your time.

Sincerely,

A handwritten signature in black ink, appearing to read "Shawn Miller". The signature is stylized with a large, looped initial "S" and a cursive "Miller".

Shawn Miller