

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
,
PICK-UP WAIT MAIL
(Section of Factor Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
- Formation and the same of th

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2003 OCT -7 PM 12: 02

TRANSMITTAL LETTER

O: Registration Section Division of Corporations	
UBJECT: A.S.A.P. Mortgage Corporation / A.S.A.P. Mortgage Services	
(Name of corporation - must include suffix)	
ear Sir or Madam:	
he enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", Certificate of Existence", and check are submitted to register the above referenced foreign corporation transact business in Florida.	
lease return all correspondence concerning this matter to the following:	
Bobac Amir Mahallati	
(Name of Person)	
A.S.A.P. Mortgage Corporation	-17
(Firm/Company)	· -
12C0 West Ave. Suite 1515	3
(Address) Miam Beach , Floirda 33139	5.0%
(City/State and Zip code)	7
or further information concerning this matter, please call:	
Bobac Amir Mahallati at (305) 535-1120	
(Name of Person) (Area Code & Daytime Telephone Number)	
IRECT ADDRESS: egistration Section ivision of Corporations Division of Corporations Division of Corporations E. Gaines St. P.O. Box 6327 Tallahassee, FL 32314 nclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status	&

Adole Mahallati 4729 Frankford Ave. Philadelphia, P.A., 19124

Qualification
Division of Corporations
P.O. Box 6327
Tallahassee, Florida, 32314

To Whom it May Concern:

9/10/03



I understand that my corporate name, "A.S.A.P. Mortgage Corporation", is not available in the state of Florida. I am adopting the following name, "A.S.A.P. Mortgage Services Corp.", for use in Florida. Thank you.

EIN # - 23-2977998

Kohlie Mohalloti President lowner

APPLECATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Delaware		3.	ED", "COMPANY", "CORPORATION" or indicate that it is a corporation instead of a present.) 23-2977998 (FEI number, if applicable) Perpetual
(State or country	under the law of which it is incorporated		(FEI number, if applicable)
	cer 29, 1998	5.	
(Trai	e of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")
Upon Qu			
(Date first trans			transacted business in Florida, insert "upon qualification."), 607.1502 and 817.155, F.S.)
. 4729 Fra	nkford Ave., Philadelphia, P.	A. 19	9124
·	(Principal offi	ce add	ress)
1200 We	st Ave. Suite 1515, Miami B	each	, F.L. 33139
	(Current maili	ng add	ress)
Morgage E	Broker Buisiness		
· Purpose	(3) of corporation authorized in home stat	e or co	ountry to be carried out in state of Florida)
	•		
	eet address of Florida registered a	_	(P.O. Box or Mail Drop Box NOT acceptable)
	eet address of Florida registered a Bobac Amir Mahallati	_	(P.O. Box or Mail Drop Box NOT acceptable)
. Name and <u>st</u> Name:	-	_	(P.O. Box or Mail Drop Box NOT acceptable)
. Name and <u>st</u> Name:	Bobac Amir Mahallati 1200 West Ave. Suite 1515		
. Name and <u>st</u> Name:	Bobac Amir Mahallati 1200 West Ave. Suite 1515		(P.O. Box or Mail Drop Box NOT acceptable) , Florida 33139(Zip code)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Departmen of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:

hairman:	Robbie Mahallati
\ddress: .	1584 Hainesport / Mt. Laurel Rd.
_	Mt. Laurel, N.J. 08053
ice Chair	rrian:
ddress:	
irector:	
.ddress: .	
irector:	
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. OFFI	
	Robbie Mahallati
ddress:	1584 Hainesport / Mt. Laurel Rd.
	Mt Laurel, N.J. 08053
ice Presi	dent:
ddress: .	· · · · · · · · · · · · · · · · · · ·
ecretary:	
ddress:	
reasurer:	
ddress: _	
	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
3	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
4	(any other holes in hamber 12 of the application)
	(Typed or crinted name and canacity of person signing application)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ASAP MORTGAGE CORPORATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF AUGUST, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE

EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE

RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT

BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ASAP MORTGAGE CORPORATION" WAS INCORPORATED ON THE TWENTY-NINTH DAY OF SEPTEMBER, A.D. 1998.

Warriet Smith Windson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 2591255

2946490 8300

030541338

DATE: 08-20-03