

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000004766

FILED
Oct 09, 2007
Secretary of State

Entity Name: POINTE FINANCIAL GROUP CORP.

Current Principal Place of Business:

4800 T-REX AVE STE 100
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

4800 T-REX AVE STE 100
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 20-4712310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVENE, DANIEL R
C/O POINTE FINANCIAL GROUP
4800 T-REX AVE STE 100
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DANIEL R LEVENE

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: LAVENE, DANIEL R
Address: 7088 VIAMARBELLA
City-St-Zip: BOCA RATON, FL 33433

Title: VCPS () Delete
Name: RICHARDSON, PAUL
Address: 7667 OAK GROVE CIR
City-St-Zip: LAKE WORTH, FL 33467

Title: T () Delete
Name: KUBACH, KIRK
Address: 14019 HICKORY RIDGE RD
City-St-Zip: LOUISVILLE, KY 40245

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: LEVENE, DANIEL R
Address: 7088 VIAMARBELLA
City-St-Zip: BOCA RATON, FL 33433

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL RICHARDSON

VCPS

10/09/2007

Electronic Signature of Signing Officer or Director

Date