


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 DEC 16 AM 8:00

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000000616

1. Corporation Name
RELOCATION FINANCIAL SERVICES, INC.

1625 ROUTE 10
1625 ROUTE 10

2. Principal Office Address
1625 ROUTE 10

3. Mailing Office Address
1625 ROUTE 10

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
MORRIS PLAINS, NJ

City & State
MORRIS PLAINS, NJ

Zip
07950

Country
USA

Zip
07950

Country
USA

REINSTATEMENT 03-04

300043469503

12/16/04-01063-011 * 900.00

4. Date Incorporated or Qualified To Do Business in Florida 02/08/1994

5. FEI Number
043075633

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$6.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
THE PRENTICE-HALL CORPORATION SYSTEM, INC.

Street Address (P.O. Box Number is Not Acceptable)
1201 HAYS STREET

Suite, Apt. #, Etc.
STE. 105

City
TALLAHASSEE

State
FL

Zip Code
32301

MRS

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 Patrick Labor, Asst. Sec.
REGISTERED AGENT MUST SIGN

Date 12/17/04

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PRES.	ARAM MINNETIAN	1625 ROUTE 10	MORRIS PLAINS, NJ 07950
SECR.	PAUL KOCH	1625 ROUTE 10	MORRIS PLAINS, NJ 07950
TREA.	ANTHONY CONS	1625 ROUTE 10	MORRIS PLAINS, NJ 07950
ASST.	STEPHEN JONES	1625 ROUTE 10	MORRIS PLAINS, NJ 07950
DIR.	JAMES M. WEICHERT	1625 ROUTE 10	MORRIS PLAINS, NJ 07950

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 807 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 807.0401 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)(f), 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: Stephen S. Jones, Asst. Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 12/29/04 973-656-3352
Daytime Phone #

CFR081 (01/04)