PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.		
CORPORATION REINSTATEMENT FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	SECRETARY OF STATE TALLAHASSEE, FLORIDA 01 DEC 13 PM 4: 56	
DOCUMENT # F98000002797 1. Corporation Name Back Bay Inc of . Colorado 2. Principal Office Address IOI S Tamiam Hail Suite, Apt. #, etc. City & State City & State City & State Country Country Country	100047430516 -12/28/0101074019 ****150.00 ****150.00 100047430516 -12/28/0101074020 *******8.75 ******8.75 4. Date Incorporated or Qualified To Do Business in Florida 5. EEI Number Applied For Not Applicable 6. CERTIFICATE OF STATUS DESIRED 6. CERTIFICATE OF STATUS DESIRED 6. To a Certificate of Status of Status Applied For Status	
7. Name and Address of Current Registered Agent Name Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State State FL 34.223 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 REGISTERED/AGENT MUST SIGN		
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Titles Name of Officers and/or Directors P Michell Mulligan 729 N Mana Sobel Report Goddon & 80401		
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. SIGNATURE: SIGNATURE: SIGNATURE AND TYPED OR PRINNED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Dayline Phone #		

MORTGAGE APPROVAL SERVICES

a division of Back Bay Inc of Colorado

Licensed Correspondent Lender	Home Loan Specialists
101 South Tamiami Trail	941-412-0033
Nokomis FL 34275	941-412-0034 FAX
	888-229-3573 Toll Free

11/09/01

Department of State Division of Corporations 409 E Gaines St Tallahassee FL 32399

To Whom It May Concern:

This letter is in reference to the reinstatement application enclosed. I have enclosed a check for 8.75 for the certificate of Status, however I have not enclosed any additional fees as the form required was mailed to the incorrect address. Back Bay Inc d/b/a Mortgage Approval Services had changed its physical and mailing address on 02/02/99, I have enclosed a print out from the internet to evidence the change. However, mailing address was not properly changed as evidenced by the second print out from the internet, hence the required documentation was not sent to the correct address which lead to the required reinstatement application to be completed.

I periodically check with sunbiz.org to view the status of the corporation and when I had last searched the web site I found that the corporation was revoked for annual report.

I hope this documentation will first reinstate Back Bay Inc with the Florida Department of Corporations. If I need to supply any additional documentation please feel free to contact me.

Sincerely,

Michelle Mulligan, President

Back Bay Inc d/b/a

Mortgage Approval Services