PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	PORATION STATEMENT		S	ecretary	TMENT OF y of State or porations			ĩ	06 MAR - SLL	9 Př	1 2: 12 ATE LORIDA
DOCUMENT # F990000033/2— 1. Corporation Name											n c 11
Mortgagelt, Inc.							US-64				
2. Principal Office Address 33 Maiden Lane 3. Mailing O 33 Ma				Mice Address aiden Lane			ref	ه سه	R2EQ81, (12/05)	- 46	a Aura
7th Floor Suite, Apr. #. 7th Fl							4/28/05 \$626081,(12/05) 0/9 \$150. 4. Date Incorporated or Qualified To Do Business In Florida 6/25/1999				
				York, NY			5. FELNumber 13-4049218 Applied For Not Applicable				
^z 1003	3 USA 1003		² 10038	B ŰŚA		6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status					
	7. Name and Address of Current Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) T200 South Pine Island Road Suite, Apt. #, Etc.										
	Planatatio				State ,	33324					
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. C. T. Corporation System Signature of Registered Agent Assistant Secretary Date Date											
9. Names	and Street Addresses of E		or Director (Flo	rida nonpro							
Titles	Name of Officers and/or Directors			Street Address of Each Officer and/or Director					City / State	/ Zip	
CEO	DOUG W. NAIDUS		33 M	AIDEN	LANE,	7TH FL	NEW	YORK,	NY	10038	
PRES.	GARY BIEFRIEND		33 M	AIDEN	LANE,	7TH FL	NEW	YORK,	NY	10038	
CFO	ROBERT C	SULA		33 M	AIDEN	LANE,	7TH FL	NEW	YORK,	NY	10038
SEC.	ANDY OCC	CHINO		33 M	AIDEN	LANE,			YORK,		
							03/1 03/1	:000 :0/06	169051 -010380	06: 16_3	3 (3 **158.75
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 507 or 617, F.S. I further certify that when filling 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 contained in Chapter 119, 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 AND	TYPED OR PRIN	ITED NAME OF	SIGNING OF	FICER OR DIREC	TOR	- 1	Date	Dayti	me Phone	#

Wortsassi

33 Maiden Lane 7th Floor New York, NY 10038

March 8, 2006

State of Florida Secretary of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida

RE: MortgageIT, Inc. FEI No.13-4049218

Enclosed is the Annual report for 2005. Please note that Mortgagelt, Inc. never received the initial January 2005 notice stating that the late fee had changed nor did we receive a Deficiency letter that was sent to us June 30, 2005 in regards to the outstanding report. For the above mentioned reasons we are requesting that the reinstatement fee be waived in this instance, and will going forward submit our annual report on the initial due date. Should you have any questions, and/inquiries please feel to contact me.

Avita Reynolds
Compliance Specialist
MortgageIt, Holdings

212-651-4656

areynolds@mortgageit.com