


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS									
DOCUMENT # <u>H65424</u>											
1. Corporation Name ACTION MORTGAGE BROKERS, INC.											
Principal Place of Business 141 Fernery Road Suite 58 Lakeland, FL 33809		Mailing Address 141 Fernery Road Suite 58 Lakeland, FL 33809									
<small>If above addresses are incorrect in any way, line through incorrect information and enter correction below.</small>											
2. New Principal Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		3. New Mailing Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country									
		4. Date Incorporated or Qualified To Do Business in Florida 7/9/1985									
		5. FEI Number <input checked="" type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable									
		6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status									
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)											
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip								
P	Iris Duke	141 Fernery Road, Suite 58	Lakeland, FL 33809								
8. Name and Address of Current Registered Agent Ken Duke 141 Fernery Road, Suite 58 Lakeland, FL 33809		9. Name and Address of New Registered Agent <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td colspan="2">Name Iris Duke</td></tr><tr><td colspan="2">Street Address (P.O. Box Number is Not Acceptable) 141 Fernery Road</td></tr><tr><td colspan="2">Suite, Apt. #, Etc. Suite 58</td></tr><tr><td>City Lakeland</td><td>State Zip Code FL 33809</td></tr></table>		Name Iris Duke		Street Address (P.O. Box Number is Not Acceptable) 141 Fernery Road		Suite, Apt. #, Etc. Suite 58		City Lakeland	State Zip Code FL 33809
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10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>Signature of Registered Agent <u>Iris Duke</u></td><td>Date <u>4-16-04</u></td></tr></table> <p style="text-align: center;">REGISTERED AGENT MUST SIGN</p>				Signature of Registered Agent <u>Iris Duke</u>	Date <u>4-16-04</u>						
Signature of Registered Agent <u>Iris Duke</u>	Date <u>4-16-04</u>										
11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (See other side for information on intangible tax.)											
12. 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.											
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>SIGNATURE: <u>Iris Duke</u></td><td style="text-align: center;">Iris Duke</td><td style="text-align: center;"><u>4-16-04</u></td><td style="text-align: center;"><u>863-859-5268</u></td></tr><tr><td colspan="2" style="text-align: center;"><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small></td><td style="text-align: center;"><small>Date</small></td><td style="text-align: center;"><small>Daytime Phone #</small></td></tr></table>				SIGNATURE: <u>Iris Duke</u>	Iris Duke	<u>4-16-04</u>	<u>863-859-5268</u>	<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	<small>Daytime Phone #</small>
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CR2E081 (12/98)