PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	RPORATION STATEME			Se	cretary	TMENT OF STATE of State orponations	<u> </u>		FILED OCT 28 PM			
DOCUMENT # K74189 1. Corporation Name Mountainside Finance Corp.								SECRETARY OF STATE TALLAHASSEE, FLORIDA				
P.O. Box 510892 Melbourne Beach, Fl. 32951												
	al Office Addres	is .		1	3. Mailing Office Address Melbourne Beach, Fl. 32951				TMENT	h2 01	1;a }	
Suite, Apt. #	 		Suite, Apt. #, etc				4. Date Incorporated or Qualified To Do Business in Florida 3/21/1989					
City & State Melbourne Beach, Fl.				City & State Melbourne Beach, FI.			5. FEI Number Applied For 65-0118066 Not Applicable					
^{Zip} 32951	1	Country USA		^{Zip} 32951		Country	6. CERTIFICAT	6. CERTIFICATE OF STATUS DESIRED		dditional Fee req Certificate of Stat		
7. Name and Address of Current Registered Agent Name												
	Richard U. Young Street Address (P.O. Box Number is Not Acceptable) 180 Sandy Shoes Drive Suite, Apt. #, Etc. City Melbourne Beach State Zip Code 32951											
8. I, being appointed the vegistered agent of the above named corporation, am familiar with and accept the of Signature of Registered Agent								Date 10/21/04				
9. Names	s and Street Ad	dresses	of Each Officer ar	d/or Director (Florid	da nonpro	ofit corporations must list a	t least 3 directors)				\Box	
Titles	Name of Officers and/or Directors			Street Address of Eacl Officer and/or Directo				City / State / Zlp			_	
Pres	Richard U. Young				180 Sandy Shoes Drive			Melbourne Beach, Fl. 32951				
VPres	Theresa M. Lloyd				P.O. Box 411802			Melbourne, Fl. 32941-1802				
Secr	Allan J Si	nger		180 Sandy Shoes Drive				Melbourne Beach, Fl. 32951				
						10/2			00042284401 8/0401041023 **303.75			
10. I certify that I am an officer or director of 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 part 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Date												

Mountainside Financial Corp.

P.O. Box 510892 Melbourne Beach, FI 32951-0892 Phone: (321) 722-3808 Fax: (321) 951-4928

October 21, 2004

Department of State Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Re: Mountainside Finance Corp.

Dear Sir/Madam;

I would like to request a corporation reinstatement on Mountainside Finance Corp. I am the president of Mountainside Finance Corp. and I have been incorporated since 1989. I have completed the annual report and paid faithfully each year for thirteen years. My 2003 and 2004 annual report never reached me, nor did any letters of dissolution of my corporation.

The annual report had my home address on it, I moved in 2003, and nothing was forwarded. I still had the same telephone numbers and yet received no calls from your department. I too did not call and since this is an annual submission did no realize there was a problem until I found out by accident.

I therefore ask to be reinstated and the reinstatement fees waived. I have spoke to your office and was instructed in what to do and that I must submit the \$150.00 for 2003 and 2004, which I am enclosing. In addition, I am enclosing \$8.75 for a certificate of status.

I would appreciate your assistance in this matter and I will strive to not let this happen again. The proper changes have been made to the reinstatement form. Thank you.

Richard U. Young

President

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