


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P00000004602		FILED 02 OCT 14 PM 1:53 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
1. Corporation Name SLH Mortgage Corporation			
2. Principal Office Address 6132 N.W. 11th Street		3. Mailing Office Address 6132 N.W. 11th Street	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Sunrise Florida		City & State Sunrise Florida	
Zip 33313	Country USA	Zip 33313	Country USA
4. Date Incorporated or Qualified To Do Business in Florida Jan 05 2000		5. FEI Number 65-0973808	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>		Additional Fee required for a Certificate of Status \$8.75	
7. Name and Address of Current Registered Agent			
Name Sylvester L Hardy		200008344632--6 -10/14/02--01005--007 *****8.75 *****8.75	
Street Address (P.O. Box Number is Not Acceptable) 6640 Emerald Lake Drive			
Suite, Apt. #, Etc.			
City Miramar		State FL	Zip Code 33023
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 Sylvester L Hardy		Date 10/10/02	
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	Street Address of Each Officer and/or Director	City / State / Zip
PSHD	Sylvester L Hardy	6640 Emerald Lake Drive	Miramar Florida 33023
			200008344632--6 -10/14/02--01005--008 *****8.75 *****8.75
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 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: Sylvester L Hardy		Date 10/10/02 Daytime Phone # 954) 581-7772	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

CR2001 (9/01)

J 10/14/02



SLH Mortgage Corporation
Sylvester L. Hardy - President

October 10, 2002

To Whom It May Concern:

Due to my personal and business address changes, I did not receive my annual Florida Corporation papers for SLH Mortgage Corporation. I found out today that effective October 4th, 2002, my corporation is in an "inactive" status.

Attached are the fees to cover all costs to reinstate me to an active status.

Thank you for your assistance.

Sincerely,

Sylvester L. Hardy, President
SLH Mortgage Corporation

6132 NW 11th Street
Sunrise, FL 33323

(954) 581-7772 Office
(954) 581-7499 Fax

