

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P00000068127**

1. Corporation Name

**UNIVERSAL KEY MORTGAGE LENDING CO.**

Principal Place of Business

Mailing Address

**8964 NW 6TH COURT  
PLANTATION FL 33324**

**POST OFFICE BOX 19656  
PLANTATION FL 33318**

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

**7300 W. MC NAB Rd  
Suite, Apt. #, etc.  
211**

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

**07/17/2000**

5. FEI Number

**65-1045224**

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

**\$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	4 City / State / Zip
<b>PRES</b>	<b>PAUYO, YRVEL J PRES</b>	<b>8964 N.W.6TH COURT</b>	<b>PLANTATION FL 33324</b>

**700023865337**  
**10/18/03--01092--009 \*\*150.00**

8. Name and Address of Current Registered Agent

**PAUYO, YRVEL J  
8964 N.W. 6TH COURT  
PLANTATION FL 33324**

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State  
**FL**

Zip Code

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. or 617.0505, F.S.

Signature of  
Registered Agent

*[Signature]*

REGISTERED AGENT MUST SIGN

Date

**10/10/03**

11. 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 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 PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**10/10/03 954-586-1420**

CR2E040 (7/03)

## **UNIVERSAL KEY MORTGAGE LENDING CO.**

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7300 W.MC NAB ROAD STE 211  
TAMARAC,FL 33321  
954-586-1420

OCTOBER 10,2003

Dear SIR OR MADAM:

I YRVEL J PAUYO AN OFFICER OR DIRECTOR OF UNIVERSAL KEY MORTGAGE LENDING CO.I FURTHER CERTIFY THAT, THE PRIOR UBR NOTICES WERE NOT RECEIVED .  
I ENCLOSED A CHECK OF 150.00 AND A COMPLETED APPLICATION FOR REINSTATEMENT.

PLEASE CONTACT ME IF YOU NEED ANY FURTHER INFORMATION.

THANK YOU IN ADVANCE FOR YOUR CONSIDERATION.

SINCERELY YOURS,

A handwritten signature in black ink, appearing to read 'Yrvel Jim Pauyo', written over a horizontal line.

YRVEL JIM PAUYO