PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

P01000032401 DOCUMENT

1. Corporation Name

NEW BEGINNINGS CREDIT REPAIR CONSULTING SERVICES , INC.

Principal Place of Business

Mailing Address

2511 NW 30TH TERRACE

on this application is true and acc;

SIGNATURE AND TY

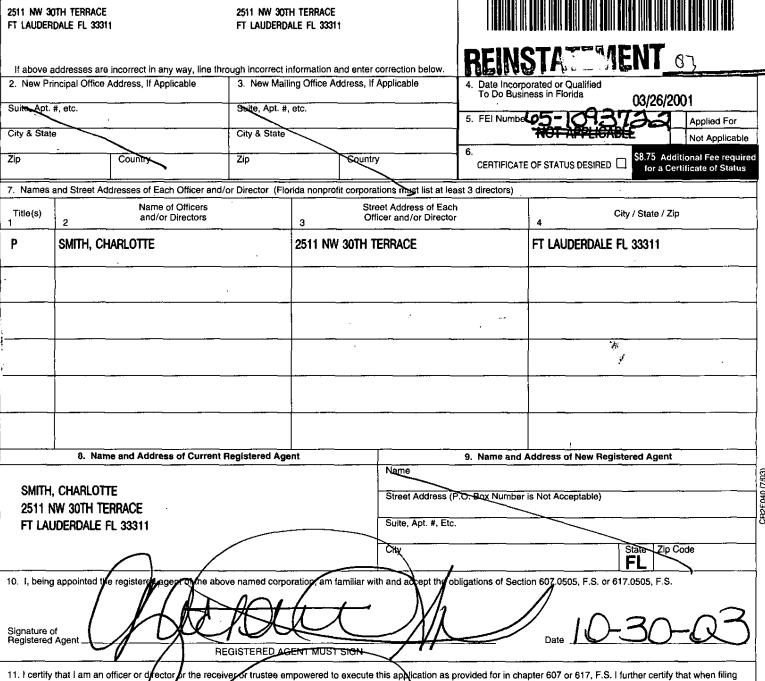
SIGNATURE:

2511 NW 30TH TERRACE

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



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 said 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 accreekt, and try signature shall have the same legal effect as if made under oath.

R OR DIRECTOR

Date

Daytime Phone #

by signature shall have the same legal effect as if made under oath.

PRINTED NAME OF SIGNIN

New Beginnings Credit Repair Consulting Services, Inc.

To whom it may concerns:

I did not receive the first and second annual report for 2003, I had to down load the annual form from Sunbiz.org. to send the \$150.00. Please reinstate my corporation and waive the \$600.00 reinstatement fee.

Charlotte Smith (954) 592-3592