1 of 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

[redacted]

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 JAN -2 AM 11:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #P01000041903

100009781881
01/02/03--01025--003 **150.00

1. Corporation Name
International Mortgage Fund & Real Estate, Inc.

2. Principal Office Address		3. Mailing Office Address	
1331 W. Central Blvd		1331 W Central Blvd	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Orlando, FL		Orlando, FL	
Zip	Country	Zip	Country
32802		32802	

4. Date Incorporated or Qualified To Do Business in Florida: 04/24/2001

5. FEI Number: ✓ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Allosha S Fishalow

Street Address (P.O. Box Number is Not Acceptable): 4039 Shorecrest Dr.

Suite, Apt. #, Etc.:

City: Orlando | State: FL | Zip Code: 32804

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 _____ Date

REGISTERED AGENT MUST SIGN

CR2E031 (9/01)

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
PD	Troy M Deal	277 Trismen Terrace	Winter Park, FL 32789
VTSD	Marcell M Deal	277 Trishmen Terrace	Winter Park, FL 32889
D	Allosha S Fishalow	4039 Shorecrest Dr	Orlando, FL 32804

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: _____ 12/27/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

BB

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INTERNATIONAL MORTGAGE FUND & REAL ESTATE, INC
1331 W. Central Blvd
Orlando, FL 32802

Dept of State Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399
Phone # 850-245-6059

December 26, 2002

Document #: **P01000041903**

Company Name: **International Mortgage Fund & Real Estate, Inc.**

Subject: **Reinstatement**

To Whom It May Concern:

I request a waiver due to non-receipt of previous Uniform Business Report.

I understand that due to non receipt, I have enclosed a check in the amount of $150.00.

Truly yours,

Troy Deal - President