

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

FLORIDA DEPARTMENT OF STATE



Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

REINSTATEMENT

FILED

02 OCT 25 PM 4:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000042239

1. Corporation Name

INFINITY FINANCIAL MORTGAGE CO.

Principal Place of Business

Mailing Address

610 NW 183RD STREET ST 6-C  
MIAMI FL 33169

610 NW 183RD STREET ST 6-C  
MIAMI FL 33169

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

04/25/2001

5. FEI Number

605-1102091

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)

Title(s)

Name of Officers  
and/or Directors

Street Address of Each  
Officer and/or Director

City / State / Zip

D

JINKS, TOBIA

8152 NW 14 PLACE

MIAMI FL 33147

900008606029  
10/28/02--01034--012 \*\*150.00

8-10/30

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

JINKS, TOBIA

8152 NW 14 PLACE

MIAMI FL 33147

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

CR2E040 (8/02)

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 REQUIRED

REGISTERED AGENT MUST SIGN

Date

10/22/02

11. 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/22/02

# INFINITY FINANCIAL MORTGAGE

610 NW 183<sup>RD</sup> STREET SUITE 6-B

MIAMI, FL 33169

PHONE (305) 651-4242 FAX (305) 651-6808

October 22, 2002

Dear Sirs/Madam,

This is to advise you that I did not received the prior **Uniform Business Report Notices**.

For I am a new Corporation and I was not aware that I should file an annual report/uniform business report. I only became aware of this when I received your **Notice of Administration Dissolution**.

I do not understand the purpose of this form, nor do I understand what information you are actually asking me for, so can you please send me some information on its purpose, and filing instructions for future reference, so I may file accurately and in a timely manner..

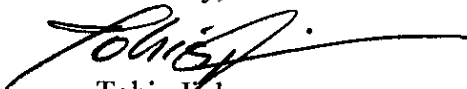
Due to my lack of knowledge, I ask you to **please** waive the reinstatement fee, it would be so **GREATLY** appreciated!

Please find enclosed my check (#1187) in the amount of \$150.00, for the filing fees , and a (hopefully) completed application for reinstatement.

If you should have any further questions please do not hesitate to call me at the above number or you may call my cell number at (786) 344-5357.

Thank you for your understanding and your prompt attention to this important matter.

Sincerely,



Tobia Jinks  
President