

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

DIVISION OF CORPORATIONS

FILED

02 OCT 23 PM 3:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PO1000057979

1. Corporation Name

Builder's Mortgage Group, Inc.

2. Principal Office Address

11780 SW 89 Street

3. Mailing Office Address

Suite, Apt. #, etc.

Ste. 300

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

Zip

33186

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

6/4/2001

5. FEI Number

65-1119219

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

Miguel Salgueiro

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

11780 SW 89 Street

Suite, Apt. #, Etc.

Ste. 300

City

Miami, Florida

State

FL

Zip Code

33186

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

REGISTERED AGENT MUST SIGN

Date 10/22/02

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	Miguel Salgueiro	11780 SW 89 Street Ste.300	Miami, FL 33186
VPD	Alfredo Socorro	11780 SW 89 Street Ste.300	Miami, FL 33186

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:

Miguel Salgueiro

10/22/02 (305) 598 9989

Date

Daytime Phone #

CR2E081 (9/01)

2042

BUILDER'S MORTGAGE GROUP, INC.

October 22, 2002

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Department of State
Division of Corporations
P.O. BOX 6327
Tallahassee, FL 32314

Division of Corporations:

Enclosed, please find our Reinstatement Application. We asking please to have the Reinstatement fees waived due to the reason that we never received the Annual Filing Report.

Thank you for your consideration.

Sincerely,



Miguel Salgueiro
President

11780 SW 89 SREET, SUITE 300 MIAMI, FL 33186
Phone: (305) 598-9989 Fax: (305) 598-9497