

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

04 APR 19 AM 10:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDACORPORATION  
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P02000008340

1. Corporation Name

CBS Mortgage Professionals, Inc.

000033978170  
04/26/04--01071--005 \*\*300.00

2. Principal Office Address

3898 Farragut Street

Suite, Apt. #, etc.

3. Mailing Office Address

3898 Farragut Street

Suite, Apt. #, etc.

City &amp; State

Hollywood, FLORIDA

City &amp; State

Hollywood, FLORIDA

Zip

33021

Country

USA

Zip

33021

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

1/23/02

5. FEI Number

26-0017879

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

Zahava Levy

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

3898 Farragut Street

Suite, Apt. #, Etc.

City

Hollywood

State

FL

Zip Code

33021

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

4/16/04

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
Pres	Zahava Levy	3898 Farragut Street	Hollywood, FL 33021

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:

Zahava Levy

4/16/04

(934)983-1118

**TAX PLANERS, P.A.**

*START UP AND SMALL BUSINESS CONSULTING-CORPORATE AND PERSONAL TAXES-BUSINESS PLANS*

STATE OF FLORIDA  
DIVISION OF CORPORATIONS  
UBR/ANNUAL REPORT 2003/2004

RE: CBS MORTGAGE PROFESSIONALS, INC.

3898 FARRAGUT STREET

HOLLYWOOD, FL. 33021

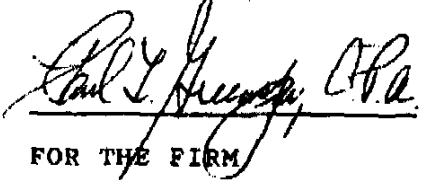
CORP. # P02000008340

PLEASE BE ADVISED THAT THE ABOVE NAMED CORPORATION MOVED TWICE TO ITS  
CURRENT ADDRESS AS SHOWN ABOVE. OFFICIAL GOVERNMENT MAIL WAS NEVER  
FORWARDED. THE 100% STOCKHOLDER, DIRECTOR & PRESIDENT BECAME ILL WAS  
HOSPITALIZED & HAD NO KNOWLEDGE OF THE RENEWAL.( ZAHAVA LEVY ).

PLEASE ACCEPT PAYMENT OF \$300.00 FOR 2003 & 2004 CHECK ENCLOSED.

THANK YOU FOR YOUR CONSIDERATION IN THIS MATTER.

RESPECTFULLY SUBMITTED;

  
FOR THE FIRM

02/07/04

cc: client file

3150 N.E. 190<sup>th</sup> Street, Suite #102, Aventura, Florida 33180  
Phone-305-466-6553 Fax-305-466-6554