

FILED

03 JUN 2003 AM 9:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03

DOCUMENT # P02000030577

1. Corporation Name
5 STAR TITLE SERVICES INC.
20180 SW 188 Street
Miami Fl 33187

2. Principal Office Address		3. Mailing Office Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

300020559673
06/06/03--01010--001 **150.00

4. Date Incorporated or Qualified To Do Business in Florida		3/20/2002
5. FEI Number	Applied For	
02-05654261	Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent		
Name Carlos E. Rubio		
Street Address (P.O. Box Number is Not Acceptable) 20180 SW 188 Street		
Suite, Apt. #, Etc. Miami Fl 33187		
City	State FL	Zip Code

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 *Carlos E. Rubio* Date 5/30/03

REGISTERED AGENT MUST SIGN

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
P	Carlos E. Rubio	20180 SW 188 St	Miami Fl 33187

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: *Carlos E. Rubio* Date 7/6/03 Daytime Phone # 786-251-2954

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (10/02)

7/6/03

5 STAR TITLE SERVICES, INC.

20180 SW 188 Street

Miami, Fl 33187

Phone: 786 251-2954

May 30, 2003

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Fl 32399

Re: 5 Star Title Services, Inc.
Corporation Renewal

To Whom It May Concern:

Per our phone conversation today, May 30, 2003, this is to let you know that I did not received the Corporation Renewal form.

Enclosed please find a check for \$150.00 for the renewal as I was told that you will waive the penalty charge.

Thank you very much.

Sincerely,


Carlos E. Rubio, President