


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>CORPORATION REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS</b>		<b>FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 04 MAY 12 PM 12:03</b>	
<b>DOCUMENT #</b> <u>PO2000075633</u>					
<b>1. Corporation Name</b> <u>AAA ATLANTIS MORTGAGE CONSULTANTS, INC.</u>					
<b>2. Principal Office Address</b> <u>2029 Northampton St.</u>		<b>3. Mailing Office Address</b> <u>SAME</u>			
<b>Suite, Apt. #, etc.</b>		<b>Suite, Apt. #, etc.</b> <u>SAME</u>			
<b>City &amp; State</b> <u>EASTON</u>		<b>City &amp; State</b> <u>PA.</u>			
<b>Zip</b> <u>18042</u>	<b>Country</b> <u>Northampton</u>	<b>Zip</b> <u>SAME</u>	<b>Country</b> <u>SAME</u>		
			<b>4. Date Incorporated or Qualified To Do Business in Florida</b> <u>July 11, 2002</u>		
			<b>5. FEI Number</b> <u>04-3699936</u>		
			<b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> <b>Additional Fee required for a Certificate of Status</b>		

**REINSTATEMENT** 03-04

<b>7. Name and Address of Current Registered Agent</b>	
<b>Name</b> <u>JOSEPH MCKENNA</u>	
<b>Street Address (P.O. Box Number is Not Acceptable)</b> <u>2905 Palm Aire Dr. North</u>	
<b>Suite, Apt. #, Etc.</b>	
<b>City</b> <u>POMPANO BEACH</u>	<b>State</b> <u>FL</u>
<b>Zip Code</b> <u>33069</u>	

<b>8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.</b>	
<b>Signature of Registered Agent</b> <u>Joseph McKenna</u>	<b>Date</b> <u>5-11-04</u>
<b>REGISTERED AGENT MUST SIGN</b>	

<b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b>			
<b>Title</b>	<b>Name of Officers and/or Directors</b>	<b>Street Address of Each Officer and/or Director</b>	<b>City / State / Zip</b>
<u>P</u>	<u>JOSEPH P. MCKENNA</u>	<u>2905 Palm Aire Dr. N.</u>	<u>POMPANO BEACH, FL 33069</u>

<b>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)(l), 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.</b>	
<b>SIGNATURE:</b> <u>Joseph McKenna</u>	<b>Date</b> <u>5-11-04</u> <b>Daytime Phone #</b> <u>610-559-6192</u>
<b>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</b>	

AAA Atlantis Mortgage  
Consultants, Inc  
2905 Palm Aire Dr. North  
Pompano Beach, Fl. 33069

Date: May 11, 2004

To: Secretary of State  
Florida Department of Corporations

Subject: Reinstate Corporation

We are sorry, but we did not receive our renewal papers for corporation. Thanks for waiving additional fees.

Joseph P. McKenna  
President AAA Atlantis  
Mortgage Consultants, Inc