PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. PARE INTO FLORIDA DEPARTMENT OF STATE CORPORATION Secretary of State REINSTATEMENT FILED **DIVISION OF CORPORATIONS** 04 JAN 23 AM 9 43 DOCUMENT # P02000087790 SECRETARY OF STATE TALLAHASSEE, FLORIDA 1. Corporation Name LLOYD FUNDING GROUP INC. 2. Principal Office Address 3. Mailing Office Address 300029383863 02/25/04--01015--031 \*\*300.00 ` 10250 S.W. 56th ST 10250 S.W. 56TH ST Suite, Apt. #, etc. Suite, Apt. #, etc. 4. Date Incorporated or Qualified 08/13/2003 SUITE # D-101 SUITE # D-101 To Do Business in Florida -City & State ---5. FEI Number Applied For MIAMI FLORIDA MIAMI FLORIDA 73-1654339 Not Applicable Country Country \$8.75 Additional Fee required U.S.A. 33165 CERTIFICATE OF STATUS DESIRED U.S.A. for a Certificate of Status 7. Name and Address of Current Registered Agent RAUL RODRIGUEZ Street Address (P.O. Box Number is Not Acceptable) 10250 S.W. 56TH STREET Suite, Apt. #, Etc. SUITE # D-101 City State Zip Code MIAMI FLORIDA.33165 <u>33165</u> 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. Date 01/20/2004 Registered Agent REGISTEREO AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each City / State / Zip Officer and/or Director 10250 S.W.56TH STREET MIAMI, FLORIDA. 33165 RAUL M.\_RODRIGUEZ 10250 S.W.56TH STREET MIAMI, FLORIDA. 33165 SILVIO ALONSO 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.

01/20/2004

(305)273-5303

Daytime Phone #

City & State

33165

Signature of

Titles

P/D

V/ST

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SUSINING OFFICER OR DIRECTOR

#PODUNO87790

**JANUARY 16, 2004** 

LLOYD FUNDING GROPUS INC. 11250 S.W. 56 STREET STE D-101 MIAMI, FLORIDA 33165 FEIN # 73-1654339 REF: ANNUAL REPORT

DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O.BOX 1500 TALLAHASSEE, FL 32302-1500

TO WHOM IT MAY CONCERN:

THIS IS TO INFORM YOU THAT MY LATE PAYMENT WAS UNINTENTIONAL DUE TO THE FACT I NEVER RECEIVED THE ANNUAL REPORT FORM BECAUSE I MOVED. IF YOU COULD WAIVE THE LATE FEE, FOR THE YEAR 2003,2004, IT WOULD BE FINDLY APPRECIATED.

IF YOU HAVE ANY QUESTIONS PLEASE FEEL FREE TO CONTACT MY ACCOUNTANT, LUIS QUINTANA AT (305) 854-6507, THANK YOU.

SINCERELY.

KAUL KOØRIGUEZ

PRESIDENT-LLOYD FUNDING GROUP INC.

P/S ENCLOSED FIND MY CHECK FOR \$300.00 FOR THE PAST AND PRESENT ANNUAL FEES.