

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

FILED

03 OCT 27 AM 10:06

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P02000105383

1. Corporation Name

Mid Florida Homes, Inc.

2. Principal Office Address

2318 Winter Woods Blvd.

Suite, Apt. #, etc.

Suite 2014

City & State

Winter Park, FL

Zip

32792

Country

USA

3. Mailing Office Address

Winter Woods Blvd.

Suite, Apt. #, etc.

Suite 2014

City & State

Winter Park, FL

Zip

32792

Country

USA

4. Date Incorporated or Qualified To Do Business in Florida

10/1/2002

5. FEI Number

11-3674217

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

DAVID L. CARRERA Mid Florida Homes, Inc.

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

2318 Winter Woods Blvd.

Suite, Apt. #, Etc.

Suite 2014

City

Winter Park

State

FL

Zip Code

32792

U00023708230
10/15/03 01053-003

***150.00

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

[Signature]

REGISTERED AGENT MUST SIGN

Date 10-7-03

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/D	DAVID L. CARRERA	2318 Winter Woods Blvd. Suite 2014	Winter Park, FL 32792
V/S	Alice R. CARRERA	2318 Winter Woods Blvd. Suite 2014	Winter Park, FL 32792

REINSTATEMENT 03/1/03

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:

[Signature]

DAVID L. CARRERA, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/7/03

Daytime Phone #

(407) 977-8477

CR2E081 (10/02)

2318 Winter Woods Blvd.
Suite 2014
Winter Park, FL 32792
(407) 977-8477 ofc
(407) 977-8355 fax

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Mid Florida Homes, inc.

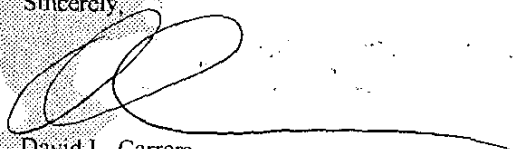
October 8, 2003

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

Dear Sir or Madam:

We have not received our Annual Report renewal notice. We are having a continued problem receiving mail, ever since Seminole County changed business addresses to numbers instead of letters. Our original address was "Suite E", and has changed to "Suite 2014". However, there are still mail delivery mix ups in our office building. We called your office and received instructions to submit a Reinstatement application along with the original renewal fee of \$ 150.- due to not receiving Annual Report notice. We request that the reinstatement fee and penalty be waived. Please update our status upon receipt. Thank you for your assistance.

Sincerely,


David L. Carrera
President