

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 OCT 29 PM 4:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PO2000115310

1. Corporation Name

REO ACQUISITIONS OF FLORIDA, INC.

1204 MANOR DR S
1204 MANOR DR S

2. Principal Office Address

1204 MANOR DR S

3. Mailing Office Address

1204 MANOR DR S

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WESTON FL

City & State

WESTON FL

Zip

33326

Country

USA

Zip

33326

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 10/25/2002

5. FEI Number

56-2315825

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 03-04

7. Name and Address of Current Registered Agent

Name

ILENE WEITZ

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

1204 MANOR DR S

Suite, Apt. #, Etc.

City

WESTON

State

FL

Zip Code

33326

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

Date 10/27/2004

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/D	ILENE WEITZ	1204 MANOR DR S	WESTON FL 33326

Sub

800042314398
10/29/04--01053--011 **300.00

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:

10/28/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/1/04)

October 27, 2004

FLORIDA DEPARTMENT OF STATE
Division of Corporations
Annual Reports Filings
P. O. Box 1500
Tallahassee FL 32302-1500

Ref.: REO ACQUISITIONS OF FLORIDA, INC.
P02000115310 / FEIN 56-2315825

Dear Sir or Madam:

We would like to let you know that we HAVE NOT RECEIVED ANY FORM BY MAIL to renew the Corporation for the years 2003 and 2004. Take on count that it was not our fault if we did not receive the renewal by mail, only we are trying to comply with the Corporate Renewal for these years, please accept our check without penalty.

Cordially,



Ilene Weitz
President/Director