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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.


FILED  
05 APR 12<sup>4</sup> AM 10:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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04/26/05--01007--002 \*\*300.00

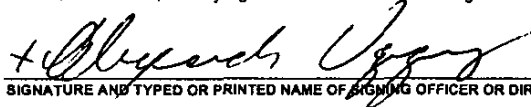
<b>CORPORATION REINSTATEMENT</b>  <b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P03000020075	
1. Corporation Name CCF OF KISSIMMEE, INC.	
2. Principal Office Address 4928 PIERCE ARROW DR. Suite, Apt. #, etc. City & State APOPIKA, FL. Zip 32712 Country U.S.	3. Mailing Office Address 4928 PIERCE ARROW DR. Suite, Apt. #, etc. City & State APOPIKA, FL. Zip 32712 Country U.S.

4. Date Incorporated or Qualified To Do Business In Florida 2/19/05	5. FEI Number 65-1174239	Applied For 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 ALEXANDER VAZQUEZ		
Street Address (P.O. Box Number is Not Acceptable) 4928 PIERCE ARROW DR.		
Suite, Apt. #, Etc.		
City APOPIKA	State FL	Zip Code 32712

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 2-2-05
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	ALEXANDER VAZQUEZ	4928 PIERCE ARROW DR.	APOPIKA / FL / 32712
D/S/T	JOSE SANTIAGO	4928 PIERCE ARROW DR.	APOPIKA / FL / 32712

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:		2-2-05	407-319-5083
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #

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April 8, 2005

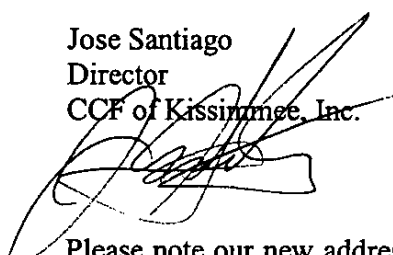
Florida Dept of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Dear: Sirs

Enclosed, I am returning you the paper work and \$300.00 for the reinstatement of our corporation "CCF of Kissimmee, Inc. ref# P03000020075 on which you sent me. I don't understand what has happened and why, as of this date, I don't have my corporation on active status. I mailed you a reinstatement form and the \$300.00 to get my corporation active. As you can see by the letter written to you back in 02/02/2005, we never received a renewal form for said corporation and had no idea that we had been put on the inactive status. I want to get matters resolved and need for you to reconsider waiving the additional reinstatement fee as I had spoken to someone there in your office last January. We have made the necessary adjustment in our office to make sure that we maintain our payment to you every year. Once again, please reactivate our corporation. Thank you.

Sincerely,

Jose Santiago  
Director  
CCF of Kissimmee, Inc.



Please note our new address as we did not receive this letter from you directly but from our bank. Our problem with the state has been the wrong address. Please correct.

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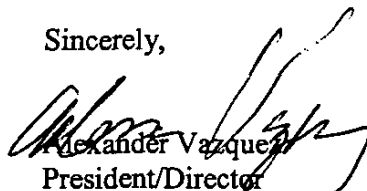
February 2, 2005

Florida Department of State  
Division of Corporation  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

Dear: Sirs

Enclosed you'll find check issue to you in the amount of \$300.00. You'll also find a copy of the completed Corporation Reinstatement form for our company. We are sending you this payment and at the same time voice our apology to you for not having it paid sooner. We started our business and incorporated on February 19, 2003. It came as quite a shock and surprise to us that we had to pay for the renewal of our company since we never received any letter or information from you. We were more surprise to hear that our corporation was dissolved. We are sending you the check to cover the fee for last year and this year and ask that you reinstate us. Please note our new address. Enclosed is the check to renew and please adjust your records so that for the coming year we can receive all information pertinent to our company. Please note our new address and other information you require. Please accept the enclosed and adjust the records accordingly. Should you have any question, you may give me a call at 407-319-5083. Thank you.

Sincerely,



Alexander Vazquez  
President/Director  
CCF Of Kissimmee, Inc.  
Doc# P03000020075