

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000124850

FILED
Nov 04, 2004
Secretary of State

Entity Name: PARK PLACE MORTGAGE BROKER SERVICES, INC.

Current Principal Place of Business:

10650 PARK PLACE DR.
SEMINOLE, FL 33778

New Principal Place of Business:

Current Mailing Address:

10650 PARK PLACE DR.
SEMINOLE, FL 33778

New Mailing Address:

FEI Number: 27-0070998

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DONOFRIO, CELI A
10650 PARK PLACE DR.
SEMINOLE, FL 33778 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: DONOFRIO, CELI A
Address: 10650 PARK PLACE DRIVE
City-St-Zip: SEMINOLE, FL 33778 US

Title: VICE () Change (X) Addition
Name: DONOFRIO, CELI A
Address: 10650 PARK PLACE DRIVE
City-St-Zip: SEMINOLE, FL 33778 US

Title: SEC () Change (X) Addition
Name: DONOFRIO, CELI A
Address: 10650 PARK PLACE DR
City-St-Zip: SEMINOLE, FL 33778 US

Title: TRES () Change (X) Addition
Name: DONOFRIO, CELI A
Address: 10650 PARK PLACE DRIVE
City-St-Zip: SEMINOLE, FL 33778

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CELI A. DONOFRIO

PRES

11/04/2004

Electronic Signature of Signing Officer or Director

Date