

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000052190

Entity Name: RATE-ONE MORTGAGE CORP.

FILED  
Oct 03, 2005  
Secretary of State

## Current Principal Place of Business:

13773 SW 181ST TERR  
MIAMI, FL 33177

## New Principal Place of Business:

299 ALHAMBRA CIRCLE  
SUITE 419  
CORAL GABLES, FL 33134

## Current Mailing Address:

13773 SW 181ST TERR  
MIAMI, FL 33177

## New Mailing Address:

299 ALHAMBRA CIRCLE  
SUITE 419  
CORAL GABLES, FL 33134

FEI Number: 20-0907929

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DEHOWARTZ, GUILLERMO  
1825 PONCE DE LEON BLVD  
SUITE 380  
CORAL GABLES, FL 33134 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: GUILLERMO DE HOWARTZ

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: P ( ) Delete  
Name: LACAYO, ARMEGEDON  
Address: 13773 SW 181ST TERR  
City-St-Zip: MIAMI, FL 33177

Title: VP ( ) Delete  
Name: LEONI, PAOLA  
Address: 13773 SW 181ST TERR  
City-St-Zip: MIAMI, FL 33177

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ARMAGEDON LACAYO

P

10/03/2005

Electronic Signature of Signing Officer or Director

Date