

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000146828

FILED
Sep 27, 2005
Secretary of State

Entity Name: MONEYCORP LOAN PROCESSING, INC.

Current Principal Place of Business:

3501 W VINE STREET
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

3501 W VINE STREET
KISSIMMEE, FL 34741

New Mailing Address:

FEI Number: 30-0281834

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORESTE, KARL A
633 NE 167TH ST SUITE 901
N MIAMI BEACH, FL 33162 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: ORESTE KARL

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: DP () Delete
Name: ORESTE, KARL A
Address: 633 NE 167TH ST SUITE 901
City-St-Zip: N MIAMI BEACH, FL 33162

Title: DV () Delete
Name: ORESTE, MAURICE
Address: 708 PINCON LANE
City-St-Zip: KISSIMMEE, FL 34759

Title: S () Delete
Name: ORESTE, ELEANOR T
Address: 708 PINCON LANE
City-St-Zip: KISSIMMEE, FL 34759

Title: T () Delete
Name: ORESTE, MICHELLE P
Address: 163800 NE 12TH AVE APT 209B
City-St-Zip: N MIAMI BEACH, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MAURICE ORESTE

MR.

09/27/2005

Electronic Signature of Signing Officer or Director

Date