2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000126644

City-St-Zip:

Entity Name: TEAM EQUITY MORTGAGE OF FLORIDA INC.

FILED Oct 19, 2006 Secretary of State

| Current Principal Pla | ace of Business: | New Principal Place | New Principal Place of Business: | |
|---|--|------------------------------------|--|--|
| | TE CENTER BUILDING 8 ENTER DRIVE, 3RD FLOOR | | | |
| Current Mailing Address: | | New Mailing Address | New Mailing Address: | |
| | TE CENTER BUILDING 8 ENTER DRIVE, 3RD FLOOR | | | |
| FEI Number: 20-3451727 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | Name and Address o | Name and Address of New Registered Agent: | |
| | ENTER DRIVE, 3RD FLOOR TE CENTER BUILDING 8 | | | |
| The above named ent in the State of Florida. | | purpose of changing its registered | d office or registered agent, or both, | |
| SIGNATURE: LUISA | THEN | | | |
| Elect | tronic Signature of Registered Ag | ent | Date | |
| Election Campaign Finan | cing Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: | () Delete | Name: PENA, LUIS | () Change (X) Addition CENTER DRIVE | |

City-St-Zip: MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: LUIS PENA MR 10/19/2006