

1082
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P06000155548**

1. Corporation Name

MORTGAGE MARKETING CONSULTANTS INC

2. Principal Office Address - No P.O. Box #

6362 LAS FLORES DR

Suite, Apt. #, etc.

3. Mailing Office Address

6362 LAS FLORES DRIVE

Suite, Apt. #, etc.

City & State

BOCA RATON FL

Zip **3343**

Country **USA**

City & State

BOCA RATON FL

Zip **3343**

Country **USA**

7. Name and Address of Current Registered Agent

Name

CHAIM INGBER

Street Address (P.O. Box Number is Not Acceptable)

6362 LAS FLORES DR

Suite, Apt. #, Etc.

City

BOCA RATON

State

FL

Zip Code

33433

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

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	CHAIM INGBER	6362 LAS FLORES DRIVE	BOCA RATON FL 33433

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 contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/8/08

Date

Daytime Phone #

20f2

CPA

BRUCE JAY REINGOLD, P.A.

7015 BERACASA WAY SUITE 208
BOCA RATON, FLORIDA 33433
TELEPHONE 561-392-7355 • FACSIMILE 561-392-7186

August 4, 2008

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

Re: P05000155548
Mortgage Marketing Consultants Inc

Enclosed please find our check in the amount of \$150.00, which represents the annual filing fee for our client, Mortage Marketing Consultants, Inc., as well as the form which we printed from the internet, requesting reinstatement.

The taxpayer never received a notice of renewal. The taxpayer has always paid the renewals in a timely fashion, but was not aware that any monies were due until she received a notice to dissolve the corporation.

We are therefore requesting that all penalties and interest be abated and the enclosed check be accepted as payment in full.

Thanking you in advance for your considerations and assistance in this matter, I remain,

Sincerely yours,

Bruce J. Reingold
Bruce J. Reingold