

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>APPLICATION FOR REINSTATEMENT</b>  <b>DOCUMENT # P95000031229</b> 1. Corporation Name <b>SIGNATURE HOME EQUITY SERVICES INC.</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS		<b>APPROVED AND FILED</b> <b>98 JUN -8 PM 3:15</b> <b>SECRETARY OF STATE</b> <b>TALLAHASSEE, FLORIDA</b>			
Principal Place of Business <b>1173 CASSAT AV.</b> <b>JACKSONVILLE, FL. 32205</b>		Mailing Address <b>same</b>					
<small>If above addresses are incorrect in any way, line through incorrect information and enter correction below.</small>							
2. New Principal Office Address, If Applicable <b>1173 CASSAT AV</b> Suite, Apt. #, etc. City & State <b>JAX, FL. 32205</b> Zip <b>David</b>		3. New Mailing Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		4. Date Incorporated or Qualified To Do Business in Florida <b>4/95</b> 5. FEI Number <b>59-3306839</b> Applied For Not Applicable 6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status			
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)							
1	Title(s)	2	Name of Officers and/or Directors	3	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4	City / State / Zip
	PRES.		SCOTT KUKELHAN		3891 MAIN ST.		MIDDLEBURG, FL. 32068
8. Name and Address of Current Registered Agent				9. Name and Address of New Registered Agent			
<b>SCOTT KUKELHAN</b> <b>3891 MAIN ST.</b> <b>MIDDLEBURG, FL. 32068</b>				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				Suite, Apt. #, Etc.			
				City			
				State	Zip Code		
				<b>FL</b>			
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.							
Signature of Registered Agent  REGISTERED AGENT MUST SIGN				Date <b>6/4/98</b>			
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (See other side for information on intangible tax.)							
12. 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 under section 119.07(3)(i), 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: <b>SCOTT KUKELHAN</b>  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date <b>6/4/98</b> Daytime Phone # <b>904-381-1188</b>			

## SIGNATURE HOME EQUITY

---

Telephone 904-381-1188  
Fax 904-381-1184

1173 CASSAT AVENUE  
JACKSONVILLE, FL. 32205

Division of Corporations  
P.O. Box 6327  
Tallahassee , Fl. 32314

6/4/98

ref. re-instatement

I sincerely apologize for my failure to file the report. After I filed my last report of record (4/96) I moved my business to a different address and didn't realize that I must notify your department of the move so that I would received future filing forms. I also changed accounting firms twice since then and neither of those firms caught the oversight on my part. I was told that I could get re-instated and the penalties waived by enclosing the attached form and a check for \$315.00.

Sincerely,



Scott Kukelhan  
President