

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT 		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000041686			
1. Corporation Name ABC LENDING, INC.			
Principal Place of Business		Mailing Address	
If above addresses are incorrect in any way, line through incorrect information and enter correction below.			
2. New Principal Office Address, If Applicable 7448 WILES ROAD Suite, Apt. #, etc.		3. New Mailing Office Address, If Applicable 7448 WILES ROAD Suite, Apt. #, etc.	
City & State CORAL SPRINGS, FL		City & State CORAL SPRINGS, FL	
Zip 33065 Country USA		Zip 33065 Country USA	
4. Date Incorporated or Qualified To Do Business in Florida 5/9/96		5. FEI Number 65-0666253 Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
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)			
Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P/O	NANCY J. CLIFF	11077 BISCAYNE BLVD SUITE 307	MIAMI, FL 33161
S	ANN MCNUTT	7448 WILES ROAD	CORAL SPRINGS, FL 33065
000004679660--3 -11/14/01--01088--019 *****150.00 *****150.00			
8. Name and Address of Current Registered Agent JAMES CLIFF 816 ENFIELD STREET BOCA RATON, FL 33487		9. Name and Address of New Registered Agent Name NANCY J. CLIFF Street Address (P.O. Box Number is Not Acceptable) 11077 BISCAYNE BLVD. Suite, Apt. #, Etc. 307 City MIAMI State FL Zip Code 33161	
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 _____ Date 10/25/01 REGISTERED AGENT MUST SIGN			
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes <input type="checkbox"/> No <input checked="" 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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		NANCY J. CLIFF Date 10/25/01 Daytime Phone # 305.893.0595	

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 01 OCT 29 AM 9:46

CR2000 (1/98)

BARON AND CLIFF
ATTORNEYS AT LAW
A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS

RICHARD BARON, P.A.
NANCY J. CLIFF, P.A.

SUITE 307
11077 BISCAYNE BOULEVARD
MIAMI, FLORIDA 33161
TELEPHONE 305-893-2535
FAX 305-893-0595

October 25, 2001

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

Re: ABC Lending, Inc.
FEI no. 65-0666253
Application for Reinstatement

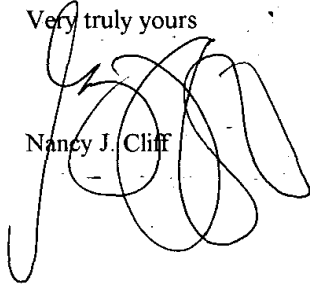
Enclosed is the application for reinstatement for the corporation listed above. The corporation was administratively dissolved on September 21, 2001. No annual report was filed for 2001 because the annual report form was not received, probably due to the confusion experienced while moving the office.

Enclosed is my check in the amount of \$150.00 for this service.

Should you have any questions, please contact me.

Very truly yours

Nancy J. Cliff



NJC/
cc: Ann McNutt