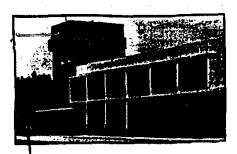
DO OF DE A	DALL MACT	DUCTIO	DEEODE O	YOMOL ET	INO THIS FORM	
APPLICATOR APPLICATOR PEINOTATEMENT			NT OF STATE	OMPLET	ING THIS FORM.	
DOCUMENT # 1) (1017) VYY) (16)				99 MAR 29 PM 12: 59		
1. Gorporation Name FIRST United MORTENGE of AMERICA, INC.				SECARIANA CA STATE TALLAMASSEE, FLORIDA		
Principal Place of Business 3500 N- STATE Laudendale Lo	alces, 1	Suite . 12 3331	9			
If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable				Date Incorporated or Qualified To Do Business in Florida 1 96		
Suite, Apt. #, etc. City & State	etc.	AC.		5 FEI Number Applied For Not Applied For Not Applied For		
Zip Country	Zıp	Countr	у	6	\$8.75 Ac	ditional Fee required ertificate of Status
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporation Title(s) Name of Officers and/or Directors Officer 3 (Do NOT Use P) Resignal DOUGLAS M-MULENZIE 1560 NW				lumbers)	City/State/2	
					0000283120 -04/06/99010 ****300.00-** 0000283120 -04/06/990100 *******8.75 **	81013 ****300.00 D21 31014
8. Name and Address of Current Registered Agent DOUG LAS M. MUCRAZIE Name DOUG				9. Name and Address of New Registered Agent		
1560 NW 128 DRIVE # 305 SUNNISE, TZ 3332-3			Street Address (P.O. Box Number is Not Acceptable) S(D) N (W) D D			
	REGISTERED AGE	ENT MUST SIGN		ligations o f Section	Date 3/4/99	
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No W (See other side for information on intangible tax.)						
12. I certify that I am an officer or director or the recthis reinstatement application, the reason for disowed by the corporation have been paid and the on this application is true and accurate, and my SIGNATURE:	e names of individu signature shall have	eliminated, the corpor als listed on this forn	rate name satisfies fi n do not qualify for a ct as if made under i	he requirements on n exemption unde	of section 607.0401 or 617.0401, F. er section 119.07(3)(i), F.S. The inf	S that all feer
- Section of the Office		CHANG OF FIVER OR D	III.O I ON		/ Date / Daytime F	none #



FIRST UNITED MORTGAGE OF AMERICA INC.

3500 North State Road 7 • Suite 437 Lauderdale Lakes, FL 33319

MARCH 4, 1999

DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314 ATT: TYRONE.

LET ME TAKE THIS OPPORTUNITY TO THANK YOU FOR MAILING ME THE APPLICATION FOR REINSTATEMENT.

THE REASON WHY MY CORPORATION BECAME DELINQUENT IS BECAUSE I WAS WAITING TO REICEIVE MY RENEWAL NOTICE BUT NEVER GOT ONE.

I THEN CALLED THE DEPARTMENT OF STATE TO FIND OUT WHY I NEVER GOT A RENEWAL NOTICE. I WAS INFORMED AT THAT TIME THAT THEY NEVER CHANGED THE OLD ADDRESS TO THE NEW ONE, ALTHOUGH THEY WERE GIVEN NOTICE OF THE NEW ADDRESS.

I WAS ALSO INFORMED THAT THEY HAD SENT NOTICES TO THE OLD ADDRESS.UNFORTUNATELY I NEVER RECEIVED ANY NOTICE.

BASED UPON THE ABOVE, I AM ASKING THAT \$150.00 PER YEAR BE ACCEPETD AS FULL PAYMENT TO BRING MY COMPANY CURRENT.

I WAS THINKING OF EXERCISING MY OPTION BY WAITING UNTIL OCTOBER OF 1999, THEN PAY ONLY \$70.00 FOR REFORMING THE COMPANY, BUT I HAVE DECIDED TO GO AHEAD AND PAY FOR 1998 AND 1999 TO MAINTAIN CURRENT STATUS.

T TRUST THERE WONT BE ANY PROBLEMS. BUT IF THE DEPARTMENT DOES NOT ACCEPT THIS APPLICATION REQUEST, PLEASE RETURN THE ENCLOSED CHECKS TO ME.

SINCERELY

DOUGLAS M. MCKENZIE

PRESIDENT

