

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 FEB 13 AM 10:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000030412

1. Corporation Name

A-1 Express Mortgage,
Inc.

2. Principal Office Address

522 Wilbur St. Brandon, Fl.
33511

3. Mailing Office Address

522 Wilbur St.
Brandon, Fl. 33511

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

USA

Zip

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

4/3/97

5. FEI Number

59-3435979

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Stacy M. Novelli

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

522 Wilbur St.

Suite, Apt. #, Etc.

Brandon

City

Brandon

State

FL

Zip Code

33511

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

Stacy Novelli

REGISTERED AGENT MUST SIGN

Date

1-30-03

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
President	Stacy M. Novelli	2817 Linden Tree St.	Seffner, Fl. 33584
V.P.	Jeffrey A. Sullivan	1114 Lady Guinevere Dr	Valrico, Fl. 33594

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 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:

Stacy Novelli

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-03

Date

(813) 643-5626

Daytime Phone #

CR2E081 (10/02)

gr 2/17



A-1 EXPRESS
MORTGAGE, INC.

A Licensed Mortgage Brokerage Business

"You WILL be Impressed with A-1 Express!"

JANUARY 30, 2003

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

RE: ANNUAL CORPORATE REPORT

TO WHOM IT MAY CONCERN:

I AM SUBMITTING A LETTER REQUESTING RE-INSTATEMENT FOR OUR CORPORATION. WE COULD NOT LOCATE OUR ANNUAL CORPORATE REPORT TO FILE. WE MUST HAVE NOT RECEIVED AN APPLICATION. I WENT TO YOUR WEB-SITE AND PULLED A RE-INSTATEMENT FORM WHICH IS ATTACHED FOR YOUR REVIEW. I AM ALSO INCLUDING A CHECK MADE PAYABLE TO THE DEPARTMENT OF STATE FOR THIS FEE OF \$300.00.

IF YOU SHOULD HAVE ANY QUESTIONS, PLEASE CONTACT STACY NOVELLI @ (813) 643-5626. OUR ADDRESS IS 522 WILBUR STREET, BRANDON, FL. 33511.

SINCERELY,

A handwritten signature in black ink, appearing to read 'Stacy', is written over the word 'SINCERELY'.

STACY NOVELLI
PRESIDENT