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 # P97000036257

1. Corporation Name

V&V FINANCIAL SERVICES, INC.

Principal Place of Business

9740 SW 159 STREET MIAMI FL 33157

Suite, Apt. #, etc.

City & State

Zip

Mailing Address

Suite, Apt. #, etc.

9740 SW 159 STREET MIAMI FL 33157

If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable

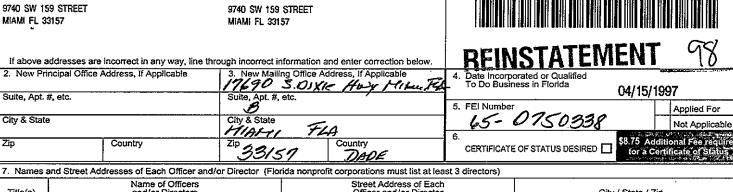
3. New Mailing Office Address, If Applicable 7690 S.OIXIC

Country

City & State HIAM Country AND FILED

98 NOV 30 PM 2: 01

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Numbers)	City / State / Zip	
PD	HICKSON, VERONICA	9740 SW 159 STREET	MIAMI FL 33157	
VD	HICKSON, VICTOR	9740 SW 159 STREET	MIAMI FL 33157	
		21	000027037728 -12/04/9801100025	
		1	****750.00 ****750.00	
			12	
	,		\$ 16013	
8. Name and Address of Current Registered Agent		nt 9. Name and A	Name and Address of New Registered Agent	
HICKSON, VICTOR		Name Street Address (P.O. Box Number	ic Not Accentable)	

City State 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

11. This corporation owes or has paid the current year

Intangible Personal Property tax due June 30.

Yes No

Suite, Apt. #, Etc.

(See other side for information on intangible tax.)

Zip Code

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

9740 SW 159 STREET MIAMI FL 33157