

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

01 MAR 27 AM 10:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

P97000063495

1. Corporation Name

Distinct Advantage Premium Finance Co.

2. Principal Office Address

12550 Biscayne Blvd./#207

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

Suite 207

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Zip

33181

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

July 22, 1997

5. FEI Number

65-0771205

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

Steven Weinberg

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

7805 SW 6 Ct.

Suite, Apt. #, Etc.

City

Plantation,

State
FL

Zip Code

33324

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

REGISTERED AGENT MUST SIGN

Date

2/27/01

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 |
|------------|--------------------------------------|---|--------------------|
| Pres/Sec'y | Katrena B. Friedman | 2327 McClendon | Houston, TX 77030 |
| VP/ Treas | Gloria S. Friedman | 7610 SW 133 St. | Miami, FL 33156 |
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CR2E081 (9/00)

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:

Gloria S. Friedman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-22-01 305-238-4038