180

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P97000077426 1. Entity Name FIRST SOUTHERN FINANCIAL, INC.							04 N	FILE DV 16 STAR: U	M II: 4		
Principal Place	e of Business	······································	Mailing Address	l ++	· -	1. 0	TALLAI	TARY UI HASSEE,	FLORE	,_)Λ	
9400 S. DADELAND BLVD			304 PALERMO AVE			Lax		·			
720 & MIAMI, FL 33156 US			MIAMI, FL 33134	US	`	TIPE					
<u> </u>	.,					」' []]]]]]]]					
2. Principal Place of Business			3. Mailing Address							<u> </u>	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			11022004	BEINP	LI CASED	3 6/04×	2004	
City & State			City & State			4. FEI Numbe				plied For	
Zip .	Zip . Country		Zip Coun		trv 65-078				8.75 Add	t Applicable	
<u> </u>	Joans, 25					<u></u>	of Status Desired	F	ee Required		
6. Name and Address of Current Registered Agent					'Name'	7. Name and	Address of New I		ent		
CHOOS, S/C											
15600 S.W		ST.,		3			Street Address (P.O. Box Number is Not Acceptable)				
SUITE 312 HOMESTE		3033				, , .					
				-	City			FL	Zip Code	9	
	named entit		for the purpose of changing its	s registered	office or registe	red agent, or bo	th, in the State of F		miliar with,	and accept	
CICNIATUDE							1				
SIGNATURE	Signature, typed	or printed name of registered ager	nt and title if applicable. (NOT	TE: Registered	Agent signature requi	ired when reinstating)		DATE			
		FEE IS \$150.00 05, Fee will be \$300.	.00			·	In accordance corporation did				
10.		OFFICERS AND	D DIRECTORS	11.		ADDITIONS,	CHANGES TO OF	FICERS AND (DIRECTORS	S IN 11	
TITLE	CD · Delete 111		TITLE					Change	Addition		
NAME STREET ADDRESS	BERG, ROBERT S				ADDRESS						
CITY-ST-ZIP					ST-ZIP					-	
TITLE	PSTD		☐ Delete	TITLE					☐ Change	Addition	
NAME	WEMPLE, STEVE M										
STREET ADDRESS CITY-ST-ZIP					ADDRESS ST-ZIP						
TITLE	17017 (1705, 1)	- 55100	☐ Delete	TITLE					☐ Change	Addition	
NAME				NAME	i and them		nord:				
STREET ADDRESS CITY-ST-ZIP			<u> </u>		ADDRESS	11/1	DOD4 2 6/04010	17017	** [5]	0.00	
TITLE			☐ Delete	TITLE	ST-ZIP}				Change	Addition	
NAMÉ			□ Delete	NAME					□ onenge	- Vanidaii	
STREET ADDRESS		,			ADDRESS						
CITY-ST-ZIP					ST-ZIP						
TITLE NAME			☐ Delete	TITLE NAME				•	☐ Change	Addition	
STREET ADDRESS					ADDRESS		•				
CITY-ST-ZIP		-	<u> </u>	CITY-S	31-41				[] Chana-	☐ Addition	
TITLE NAME	-		LJ Delete	TITLE					∐ Change	Addition	
STREET ADDRESS	1			STREET	T ADDRESS						
CITY-ST-ZIP	1			CITY-S	ST - ZIP						
	<u> </u>		^								
12. I hereby indicated of the co	i on this repo rooration or t	rt or supplemental report	in this filing does not qualify for is true and accurate and that powered to execute this repor- all other like empowered	my signatu t as require	ire shall have the	same legal effe	ct as if made under	r oath: that I ar	n an officer	or director	

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DE LA HOZ & ASSOCIATES, P.A.

CERTIFIED &UBLIC ACCOUNTANTS

MEMBER OF THE
FLORIDA INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS,
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

,304 PALERMO AVENUE CORAL GABLES, FL 33134 TELEPHONE (305) 448-5585 FAX (305) 448-7590 WWW.DELAHOZCPA.COM

October 25, 2004

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

RE: First Southern Financial, Inc.
FEI# 65-0781183
Notice of Administrative Dissolution or Revocation

To Whom It May Concern:

We are writing on behalf of the above referenced taxpayer. On October 18, 2004, First Southern Financial, Inc., received a Notice of Administrative Dissolution or Revocation. Per our records, the above referenced corporation did not receive the prior two Uniform Business Report notices for 2004.

Therefore, we ask that the reinstatement fee be waived. Please find enclosed a check for \$150.00 to return to active status.

Should you require additional information, please do not hesitate to contact me at (305) 448-5585

CA 200 1

Sincerely

Nicole M. Martinez

De La Hoz & Associates, P.A.