

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 NOV -6 PM 3:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000007427

1. Corporation Name

Premier Funding Group, Inc.

2. Principal Office Address

10250 SW 56 St

Suite, Apt. #, etc.

C-103

City & State

Miami, FL

Zip

33165

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

900024475239
11/06/03-01015-012 **150.00
REINSTATEMENT 03

4. Date Incorporated or Qualified
To Do Business in Florida

1/22/98

5. FEI Number

65-0807771

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

Cecilia Garcia

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

116660 SW 86 Ct

(new address)

Suite, Apt. #, Etc.

City

Miami, FL 33157

State

FL

Zip Code

33157

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

[Signature]

Date 10/30/03

REGISTERED AGENT MUST SIGN

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
100% owner	Cecilia Garcia	116660 SW 86 Ct Miami	Miami, FL 33157

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature]

Date

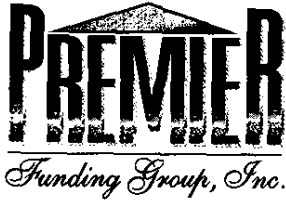
10/30/03

Daytime Phone #

305 275 5255

CR2E081 (10/02)

TR



October 30, 2003

Division of Corporations
(URB) Filings

Re: Premier Funding Group, Inc.
Document No. P98000007427
FEI # 65-0807771

To Whom It May Concern:

As per your instructions today during our telephone conversation, attached you will find the completed Reinstatement Form along with a check of \$ 150.00. Please be advised that we continue experiencing problems with our mailman and the post service in our building. I intend correct the problem immediately in order to avoid further delays.

I apologize for any inconvenience this may have caused.

Should you have any questions, please contact me at (305) 275-5255.

Thank You,



Cecilia Garcia
President