

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000024454

FILED  
Feb 22, 2006  
Secretary of State

Entity Name: BETA MORTGAGE PROFESSIONALS CORP.

**Current Principal Place of Business:**

9990 SW 77 AVENUE  
#317  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

9990 SW 77 AVENUE  
#317  
MIAMI, FL 33156

**New Mailing Address:**

FEI Number: 65-0832530

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BETANCOURT, JULIA  
9990 SW 77 AVENUE  
SUITE #317  
MIAMI, FL 33156 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JULIA M. BETANCOURT

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BETANCOURT, JULIA M  
Address: 4990 SW 77TH AVE #317  
City-St-Zip: MIAMI, FL 33156

Title: V ( ) Delete  
Name: BETANCOURT, SERGIO A  
Address: 9990 SW 77TH AVE #317  
City-St-Zip: MIAMI, FL 33156

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BETANCOURT, JULIA M  
Address: 9990 SW 77TH AVE #317  
City-St-Zip: MIAMI, FL 33156

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIA M. BETANCOURT

Electronic Signature of Signing Officer or Director

PD

02/22/2006

Date