## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

**DIVISION OF CORPORATIONS** 

## DOCUMENT # **P98000062179**

1. Corporation Name

ROYAL STAR 2000 MORTGAGE, INC.

Principal Place of Business

SIGNATURE:

Mailing Address

on this application is true and accurate, and my signature/shall have the same legal effect as if made under oath.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SEGRETARY OF STATE OLVISION OF CORPORATIONS OI OCT 18 AM 8:50

Daytime Phone #

1301 N.CONGRESS AVE STE 410 BOYNTON BCH FL 33426	701 W. CYPRESS CREEK ROAD SUITE 302 FT LAUDERDALE FL 33309						
If above addresses are incorrect in any way, line through incorrect information and enter correction below.				05-23-01 91155 033 \$150-00			
2. New Principal Office Address, If Applicable	3. New Mailing C	Office Address, If	Applicable CSS CICCK	A. Date Incorporated or Qualified			
Suite, Apt. #, etc.	ic.		5. FEI Number				
City& State City& State Ft. 1 audpedal L. Ft. 1 aud		deedale FC		65-0849926 Applied For Not Applicable			
Zip 333 Country Zip 33330		Country		6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status			
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)							
Title(s) Name of Officers and/or Directors			eet Address of Each cer and/or Director		City / State / Zip		
President GillermoJ	Dire 8	3717Bin	y handoux1	1e	Boynton	Buh FC	33436
			•				
						= 4.4	
					P	1020	
						<b>)</b>	
8. Name and Address of Current Registered Agent				9. Name and Address of New Registered Agent			
KODSI & EISENSTEIN, P.A. 701 W CYPRESS CREEK ROAD STE 302 FT LAUDERDALE FL 33309			Name (108)				
			Street Address (P.O. Box Number is Not Acceptable)				CRZE040 (8/01)
			Suite, Apt. #, Etc.				
		į	City		, , , , , , , , , , , , , , , , , , , ,	State Zip Coo	ie
10. I, being appointed the registered agent of the above	e named corporatio	n, am familiar wit	h and accept the ob	ligations of Secti	on 607.0505, F.S.		
Signature of Registered Agent REG	GISTERED AGENT	MUST SIGN	24 N 20 W 24 Z 20 Z 2		Date/	111/01	
11. I certify that I am an officer or director or the received this reinstatement application, the reason for dissolution owed by the corporation have been paid and the national corporation.	ution bas been elimi	inated, the corpor	ate name satisfies t	he requirements	of section 607.0401	l or 617.0401, F.S., t	that all fees



## MORTGAGE LENDERS DIRECT

701 West Cypress Creek Rd Suite 303 Ft, Lauderdale Fl 33309 Ph 954.771.9977 Fx 954.771.2001

October 11, 2001

Division Of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Annual Report for Royal Star 2000 Mortgage Inc.

To Whom It May Concern:

This letter is to inform the following that the fee of \$150.00 was paid in full for the annual report regarding Royal Star 2000 Mortgage Inc. Enclosed please find a fully executed application for Royal Star 2000 Mortgage Inc. for the third time. I spoke to an agent from your department on Thursday October 11, 2001 regarding this matter. We sent out the annual report twice and paid for this in full. The agent from your office said to fill out the application again and don't worry about being reinstated.

If you have any questions don't hesitate to call me at 954-771-9977

Sincerel

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Royal/Star 2000 Mortgage Inc.