

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 OCT 31 AM 10:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P 9900000 7339

1. Corporation Name

HOMESALES.COM, INC.

2. Principal Office Address

9900 W. Sample Road

Suite, Apt. #, etc.

#203

City & State

CORAL SPRINGS, FL

Zip

33065

Country

BROWARD

3. Mailing Office Address

9900 W. Sample Road

Suite, Apt. #, etc.

#203

City & State

CORAL SPRINGS, FL

Zip

33065

Country

BROWARD

000024384140

11/03/03--01080--017 **608.75

REINSTATEMENT 00-03

**4. Date Incorporated or Qualified
To Do Business in Florida**

1/21/1999

5. FEI Number

65-0901756

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

RICHARD H. ASHENFARB

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

11908 GLENMORE DRIVE

Suite, Apt. #, Etc.

City

CORAL SPRINGS

State

FL

Zip Code

33071

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 10/31/03

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
Pres	RICHARD ASHENFARB	11908 GLENMORE DRIVE	CORAL SPRING, FL 33071
DIR.	SCOTT BOGATZ	11908 GLENMORE DRIVE	CORAL SPRINGS FL 33071

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] - RICHARD ASHENFARB, PRESIDENT

Date

Daytime Phone #

10/31/03 0820

CR2E081 (10/02)

October 31, 2003

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

**RE: HomeSales.com, Inc. – Document # P99000007339
CORPORATION RE-INSTATEMENT**

To Whom It May Concern:

Please find the following pertaining to the re-instatement of my Corporation:

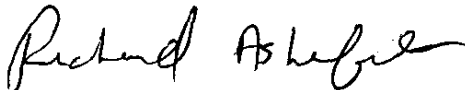
- ❖ Corporation Re-Instatement form
- ❖ Check for re-instatement fee (including additional fee for Certificate of Status)

Please accept my payment of \$608.75 as payment for re-instatement. I never received any of the Annual Reports during this time period. Therefore, I don't believe I should be penalized for my failure to comply. I most certainly would have filed in a timely manner if I had received the Annual Report forms. As you might well imagine, keeping an active corporate status is paramount to my ability to successfully run a business in Florida.

As a result, I have enclosed payment for the re-instatement of the above corporation as follows:
\$150.00 per year since Administrative Dissolution was filed September 22, 2000. This period covers four (4) years totaling \$600.00 plus an additional \$8.75 for a Certificate of Status.

Thank you for all considerations given to me. If you have any further questions, kindly contact me at:
(954) 255-0800.

Cordially,



Richard Ashenfarb
President

encs.