

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10F2

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 FEB -1 PM 2:13

DOCUMENT # P99000100666

1. Corporation Name

1ST FINANCIAL FEDERAL, INC.

2. Principal Office Address

210 UNIVERSITY DRIVE

Suite, Apt. #, etc.

208

City & State

CORAL SPRINGS FL.

Zip

33071

Country

USA

3. Mailing Office Address

210 UNIVERSITY DRIVE

Suite, Apt. #, etc.

208

City & State

CORAL SPRINGS FL.

Zip

33071

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

11-12-1999

5. FEI Number

☒ 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

Joseph P. Andy

300003655903 - 4

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

210 UNIVERSITY DRIVE

-02/07/01-01038-016

****300.00 ****300.00

Suite, Apt. #, Etc.

208

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 01/30/2001

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.	Joseph P. Andy	210 UNIVERSITY DRIVE # 208	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]

Joseph P. Andy

01/30/2001

954-757-9330

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/00)

CITIZEN'S TITLE SERVICES, INC.

210 UNIVERSITY DRIVE, #208
CORAL SPRINGS, FLORIDA 33071
TEL: (954) 757-9330 • FAX: (954) 757-9507

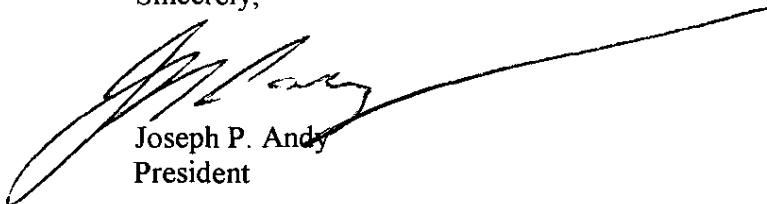
January 30, 2001

To Whom It May Concern:

Please be advised that First Federal Financial, Inc is requesting that you reinstate the Corporation. I did not receive the Corporation papers because our office suite number was changed by the new building owners. This is why I am filing so late.

Please accept my check for \$300.00 and reinstate my Company this time.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Andy', with a long horizontal flourish extending to the right.

Joseph P. Andy
President