2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000038948

1. Entity Name
WESFORT, CORPORATION

FILED
04 NOV 19 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11182004 REIN-P CR2E098 (6/04)

Principal Place of Business	Mailing Address
4144 N ARMENIA AVE STE 300 TAMPA, FL 33607	4144 N ARMENIA AVE STE 300 TAMPA, FL 33607

2. Principal Place of Business	3. Mailing Address
2203 N. Lois Ave.	2203 N. LOIS AVE.
Suite, Apt. #, etc. 720	Suite, Apt. #, etc. Suite 720
City & State TAMPA, FL	City & State TAMPA, FL
Zip 33607 / Country U.S.A.	Zip 33607 / Country U.S.A.

4. FEI Number 42-1597913 — Applied For / Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BACCARELLA, DOMINIC
4144 N ARMENIA AVE STE 300
TAMPA, FL 33607

7. Name and Address of New Registered Agent

Name ARTHUR NORIEGA, IV

Street Address (P.O. Box Number is Not Acceptable)
2203 N. LOIS AVE., Suite 720

City TAMPA FL Zip Code 33607

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Arthur Noriega IV DIRECTOR 11/17/04
Signature, typed or printed name of registered agent and title if applicable. **(NOTE: Registered Agent signature required when reinstating)** DATE

FILE NOW!!! FEE IS $150.00
After January 1, 2005, Fee will be $300.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D ☑ Delete	TITLE	D ☑ Change ☐ Addition
NAME	NORIEGA, ART	NAME	ARTHUR NORIEGA, IV
STREET ADDRESS	4144 N ARMENIA AVE STE 300	STREET ADDRESS	2203 N. LOIS AVE., Suite 720
CITY-ST-ZIP	TAMPA, FL 33607	CITY-ST-ZIP	TAMPA, FL 33607
TITLE	☐ Delete	TITLE	P, D ☐ Change ☑ Addition
NAME		NAME	TAHSIN ADNAN TAN
STREET ADDRESS		STREET ADDRESS	2203 N. Lois Ave., Suite 720
CITY-ST-ZIP		CITY-ST-ZIP	TAMPA, FL 33607
TITLE	☐ Delete	TITLE	V, D ☐ Change ☑ Addition
NAME		NAME	YUSUF AHMET TAN
STREET ADDRESS		STREET ADDRESS	2203 N. Lois Ave., Suite 720
CITY-ST-ZIP		CITY-ST-ZIP	TAMPA, FL 33607
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	000042907300
STREET ADDRESS		STREET ADDRESS	11/19/04--01068--003 **158.75
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	REINSTATEMENT 04
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Arthur Noriega IV 11/17/04 (813)8740330
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ARTHUR NORIEGA IV