

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

FILED

03 FEB 25 AM 8:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 479360

1. Corporation Name

Wes Invest, Inc.

2. Principal Office Address

1350 Orange Ave.

Suite, Apt. #, etc.

Suite # 247

City & State

Winter Park, Fl.

Zip

32789

Country

U.S.A.

3. Mailing Office Address

1350 Orange Ave.

Suite, Apt. #, etc.

Suite # 247

City & State

Winter Park, Fl.

Zip

32789

Country

U.S.A.

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

06/20/1975

5. FEI Number

59-1602714

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for Certificate of Status

7. Name and Address of Current Registered Agent

Name

James A. Wesley

Street Address (P.O. Box Number is Not Acceptable)
1350 Orange Ave.

Suite, Apt. #, Etc.

Suite # 247

City

Winter Park, FL

State
FL

Zip Code
32789

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0502, F.S.

Signature of
Registered Agent

James A. Wesley
REGISTERED AGENT MUST SIGN

Date

2/18/03

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
PD	James A. Wesley	5612 Sand Crane Cove	Oviedo, Fl. 32765
VPD	Richard E. Wesley	1831 Red Wood Terr.	Grove. Lake Mary, Fl. 32746

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:

James A. Wesley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/18/03 (407) 629-9510
Daytime Phone #

CR2E081 (10/02)

Wes Invest, Inc.
James A. "Jim" Wesley

(407) 629-9510 office (407) 366-5644 home

Fax: (407) 629-9512

Email: Jaw@WesInvest.com

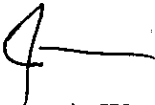
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

February 18, 2003

Re: Corporation Reinstatement

Due to our move in August 2000, We have not received any Annual Reports. We are requesting to be reinstated, also request that the fees be waived. Attached is a check for 2001, 2002 & 2003 in the amount \$ 450.00.

Thank You,



James A. Wesley, President