2004 FOR PROFIT CORPORATION REINSTATEMENT

REINSTATEMENT					-		FILER		
DOCUMENT # 583938						~ 1/3/j	CHE FARY OF CORPO	STATE	
Entity Name WEST END QUICK-PIC, INC.						Di. o	סייאטייי. יי	RATIO.	
WEST END GOTON TO, INC.						04 ()	CT 20 AM	3: 19	
Principal Place of Business Mailing Address					DEBOR			•	
19937 WEST		PO BOX 501		İ	LICHUS SWIDT	STATEN	ALENT A	34	
BLOUNTSTOWN, FL 32424		BLOUNTSTOWN, FL 32424			10000 total (PINE 1901 III)				
2. Principal Pla	3. Mailing Address	alling Address		-					
2. Finispan face of Business				-520	10167 HILE INISA 19101 INI	AISIT CIAN BIÓN BIÓN BIÓN	7)21 8E1 [E2]		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		10192004	REIN-P	CR2E098 (6/0-	4)		
City & State		City & State		4. FEI Numbe		 	Applied For		
Zip Country		Zip Count		try	59-1850249 5. Certificate of Status Desired			Not Applicable	
				·	<u> </u>		Fee Requ		
	6. Name and Address of Current	7. Name and Address of New Registered Agent Name							
PICKRON, MILDRED A 929 W CEN AVE			Street Address (P.O. Box Number is Not Acceptable)						
BLOUNTSTOWN, FL 32424									
				City			F Zip C	ode	
6. The charge of making the site that products of the state of the sta					<u> </u>				
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									
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algesture required when reinstating) DATE OATE									
FILE NOWII 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		B 44		ADDITIONS	·	ICERS AND DIRECTO		
TITLE	PD OFFICERS AND	Delete	11.	E			☐ Chanc		
NAME STREET ADDRESS	PICKRON, ROY D.	•	NAM	- 1		0 0042 (031 0 32 5003 **1		
CITY-ST-ZIP				EET ADORESS '-ST-ZIP	To. C.	ay na) DOG 4-4-1	30.00	
TITLE	VD	Delete	TITL.	L L			☐ Chang	pe Addition	
NAME STREET ADDRESS	PICKRON, ROY Y M.G. HOLLEY RD		NAM Stri	EET ADORESS					
CITY-ST-ZIP	BLOUNTSTOWN, FL		СПҮ	-ST-ZIP					
TITLE NAME	ST PICKRON, MILDRED	☐ Delete	TITL	1			☐ Chan	ge 🗌 Addition	
STREET ADDRESS	P.O. BOX 501 N/A	د سیمان استان در این این این این این استان در	STR	EET ADDRESS	• ,		<u></u> .		
TITLE	VD BLOUNTSTOWN, FL	□ Defete	TITL	r-ST-ZIP		<u> </u>	Chan-	ge 🔲 Addition	
NAME	FOLSON, DALE H	La Delete	NAM				C Criati	No 🗇 Addition	
STREET ADDRESS .	313 FOLSOM AVE BLOUNTSTOWN, FL			EET ADDRESS (-ST-ZIP					
TITLE		☐ Delete	TITL				☐ Chan	ge Addition	
NAME STREET ADDRESS			NAN STR	AE Eet address					
CITY-ST-ZIP				Y-ST-ZIP					
TITLE		☐ Delete	TITL NAA				Chan	ge Addition	
STREET ADDRESS				EET ADDRESS					
CITY-ST-ZIP		ALC PALS		Y-ST-ZIP	A =====				
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: Mildred a. Pichum / Mildred A. Pickron 10-19-04 850-674-8534 SIGNATURE: Mildred a. Pichum / Mildred A. Pickron 10-19-04 850-674-8534 Data Data Data									