

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F06000007410

**FILED**  
**Dec 01, 2009**  
**Secretary of State**

**Entity Name:** WYNGATE INTERNATIONAL, INC.

**Current Principal Place of Business:**

1007 N. FEDERAL HWY SUITE # 392  
FT. LAUDERDALE, FL 33304 US

**New Principal Place of Business:**

**Current Mailing Address:**

1007 N. FEDERAL HWY SUITE # 392  
FT. LAUDERDALE, FL 33304 US

**New Mailing Address:**

**FEI Number:** 20-5861133

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BUSINESS FILINGS INCORPORATED  
1203 GOVERNOR'S SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: BF, INC.

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: STOJANOV, NICOLE  
Address: 1007 N. FEDERAL HWY SUITE # 392  
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: D ( ) Delete  
Name: STOJANOV, NICOLE  
Address: 1007 N. FEDERAL HWY SUITE # 392  
City-St-Zip: FT. LAUDERDALE, FL 33304

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NICOLE STOJANOV

PRES

12/01/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date