

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 OCT 20 PM 3:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L 72178

1. Corporation Name

WAYFAST, INC.

2. Principal Office Address

400A W. COCOA BCH CSWY

Suite, Apt. #, etc.

City & State

COCOA BEACH, FL.

Zip

32931

Country

US

3. Mailing Office Address

400A W. COCOA BCH CSWY

Suite, Apt. #, etc.

City & State

COCOA BEACH, FL

Zip

32931

Country

US

REINSTATEMENT 00-04

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

5/11/1990

5. FEI Number

593023062

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

EDWIN J. MOWREY JR.

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

400A W. COCOA BCH CSWY

Suite, Apt. #, Etc.

City

COCOA BEACH

State

FL

Zip Code

32931

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

Edwin J. Mowrey Jr.  
REGISTERED AGENT MUST SIGN

Date

10/18/04

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
<u>P/T</u>	<u>EDWIN J. MOWREY JR.</u>	<u>400A W COCOA BEACH CSWY</u>	<u>COCOA BEACH, FL 32931</u>
<u>V/S</u>	<u>EDWIN J. MOWREY III</u>	<u>145 5th STREET</u>	<u>INDIANLANTIC, FL. 32903</u>

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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:

Edwin J. Mowrey Jr.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/18/04

Daytime Phone #

321-868-6728