

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 NOV 24 PM 12:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N01000003300

1. Corporation Name

Women With A Purpose, Inc.

2. Principal Office Address

8732 SW 145 Street

Suite, Apt. #, etc.

City & State

Miami, Florida

Zip

33176

Country

USA

3. Mailing Office Address

8732 SW 145 Street

Suite, Apt. #, etc.

City & State

Miami, Florida

Zip

33176

Country

USA

REINSTATEMENT

03

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

May 10, 2001

5. FEI Number

02-0545392

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

Shunda T. Brown

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

8732 SW 145 Street

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33176

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

Shunda T. Brown

REGISTERED AGENT MUST SIGN

Date 11/12/03

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
P/D	Shunda T. Brown	8732 SW 145 Street	Miami, FL 33176
VP	Kelvina Darling	16803 SW 107 Place	Miami, FL 33176
S	Marjorie Smith	10021 Martinique Drive	Miami, FL, 33189
D	Sylvia Fields	16235 SW 107 Court	Miami, FL 33156
D	Louise Smith	15211 NW 33 Court	Miami, FL 33199

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:

Shunda T. Brown

Shunda T. Brown

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/12/03

Date

305-284-6699

Daytime Phone #

CR2E081 (10/02)

WOMEN WITH A PURPOSE, INC.

November 12, 2003

To Whom It May Concern:

In September, I contacted your office in reference to not receiving my UBR for 2003. I was informed that it had been mailed to me but was returned to your office for incorrect address. I was told to go on-line print on and send it in. I followed the instructions and in early November called your office to say my check had not been cashed. I was then told that the corporation had been dissolved on 9/9/03, and that a second letter sent to me had been returned. I was then told to fill out the reinstatement form and send it in with my check for \$61.25.

Enclosed you will find the form and check for \$70.00 to cover the reinstatement and a certificate of status. Can this document be sent to WWAP, Inc., 8732 SW 145 Street, Miami, FL 33176. If you have any question, you may contact me (305) 284-6699 between the hours of 9a-5p.

Thank you for your immediate response.

Sincerely,

Shunda T. Brown

Shunda T. Brown
Founder & President
WWAP, Inc.

WWAP, Inc.

8732 SW 145 Street * Miami Florida 33176 * 305-256-9392-Office * 305-259-4715- Fax
E-mail: wwapinc@yahoo.com