## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P00879

Title:

Name:

Address:

City-St-Zip:

tity Name: WEIDLINGER ASSOCIATES INC

FILED Oct 31, 2005 Secretary of State

Entity Nan	ne: WEIDLIN	GER ASSOCIATES, INC.			
Current Pr	incipal Place	of Business:	New Principal Place	New Principal Place of Business:	
	ON STREET K, NY 100143	656			
Current Mailing Address:			New Mailing Address:		
	ON STREET K, NY 100143	656			
FEI Number:	13-3140140	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and	Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:	
1201 HAYS		ORATION SYSTEM, INC. 01 US			
The above in the State		submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUR		E-HALL CORPORATION			
	Electror	nic Signature of Registered Ag	ent	Date	
		3(2)(b), F.S., the corporation did n g Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( ) ISENBERG, JE 240 POLHEMU ATHERTON, CA	S AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LEVY, MATTHY 40 COLLEGE S	Delete 'S P., STREET APT 702 VT 054017316	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S ( ) RITTENHOUSE 42 MEADOWB CHATHAM, NJ	ROOK ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	C ( ) HAGH, ABDUL 11 BEETHOVE WABAN, MA 0		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: RAYMOND DADDAZIO T 10/31/2005

( ) Delete

DADDAZIO, RAYMOND P

771 WESTEND AVENUE

NEW YORK, NY 10025

() Change () Addition