PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT DOCUMENT # 1. Corporation Name	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 05 JAN 12 PM 4: 22 SECRETARY OF STATE TALLAHASSEE, FLORIDA
DWC Investments, INC.		
P01000026464		
2. Principal Office Address. 6. Shake's Frozen Custard	3. Mailing Office Address C/O Shake's Frozen Custard	WEINSTATEMENTO3 - 05
Suite, Apt. #, etc. 1065 Highway 98 EAST	Suite, Apr. #, etc. 1065 Highway 98 East	4. Date Incorporated or Qualified To Do Business in Florida 3/14/2001
City & State Destin,	Destin FL	5. FEI Number Applied For Not Applied For Not Applied For
32541 Country us A	32541 Country usa	6. CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent		
Name Wayne K. Chernicky Street Address (P.O. Box Number is Not Acceptable)		
4396 Old Bayou Trail		
Suité, Apt. #, Etc.		
city Destin		State Zip Code 32541
8. 1, 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 Date 16/2005 REGISTERED AGENT MUST SIGN		
9. Names and Street Addresses of Each Officer and	d/or Director (Florida nonprofit corporations must list at lea	ast 3 directors)
Titles Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/T Wayne K. Cherni	cky 4396 Old Bayon	Trail Destin, FL 32541
VS Dee D. Chern	ricky 4.396.01d Bayon	Trail - Destin, FL-3254/-
	7 - 10-11	500044633325 01712705-01046-024 **458.75
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 filling 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: Warre # . Chemich 1/6/05 850-269-1100 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayling Phone #		

DWC Investments, Inc.

d/b/a Shakes Frozen Custard

4396 Old Bayou Trail, Destin, Florida 32541-2086

(850) 269-1100 Phone

(850) 240-7100 Cell

(850) 269-0117 Fax

To: Division of Corp Co: FLorida Dapt of State From: Wayne Chernicky, Pres. Date: Jan 9, 2005

Date. Jone 1, 20

RE: Waive Reinstatament fea

Doc. Number P01000026464

Dear Sirs:

We request the \$6000 reinstatement fee be waived for the following reasons:

- 1. The mailing address previously shown is old and incorrect. I have not received notifications.
- 2. Our business was damaged by Hurricane Ivan in September 2004 and an additional \$600 fee would cause Financial hardship for our small business. We are trying to obtain refinancing from Bank of America to repair our signs & building when we were advised of the Admin. dissolution effective Sept 19, 2004.

3. We have enclosed \$45000 for 2003, 2004 \$2005.
Please reinstate our corp. ASAP SO We Can
finalize our Financing and repairs.

Questions call: 850-269-1100

Thank you, Wayne K. Chernicky President