PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 NOV 24 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000013072

1. Corporation Name
Oscar Wegner Enterprises, Inc

REINSTATEMENT 03

2. Principal Office Address	**3.** Mailing Office Address
2056 Sunset Pt. Rd	Same
Suite, Apt. #, etc.: Suite 22	Suite, Apt. #, etc.
City & State: Clearwater FL	City & State
Zip: 33765 Country: USA	Zip Country

4. Date Incorporated or Qualified To Do Business in Florida: Feb 5, 2002

5. FEI Number: 02-0553845 ☐ 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: Oscar E Wegner

300024994963
11/24/03--01129--001 **15.75

Street Address (P.O. Box Number is Not Acceptable): 2056 Sunset Point Rd

Suite, Apt. #, Etc.: Suite 22

City: Clearwater | State: FL | Zip Code: 33765

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: Oscar E Wegner — REGISTERED AGENT MUST SIGN — Date: 11/19/03

CR2E081 (10/02)

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
Pres	Oscar E Wegner	2056 Sunset Pt Rd Suite 22	Clearwater FL 33765
Sec Treas	Oscar E Wegner	"	"

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: Oscar E Wegner — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 11/19/03 — Date — 7274498480 — Daytime Phone #

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Clearwater, Florida, November 19th, 2003.

Florida Department of State
Division of Corporations

To whom it may concern:

I am respectfully requesting a waiver of the penalty for late filing of the UBR for Oscar Wegner Enterprises, Inc., because I did not receive the renewal paperwork in the mail in time and I have not received it at this point.

Thank you for your assistance.

Sincerely,

Oscar Wegner
Registered agent
2650 SUNSET POINT RD
SUITE 22
Clearwater FL 33765
(727) 449 8480
FAX (727) 461 5566