

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P02000047494

1. Corporation Name

WBR INVESTMENT CORP.

Principal Place of Business

3141 FORTUNE WAY  
SUITE 5  
WELLINGTON FL 33414

Mailing Address

3141 FORTUNE WAY  
SUITE 5  
WELLINGTON FL 33414

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

05/01/2002

5. FEI Number

02 059 3210

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PTD	LIEBERMAN, RICHARD L	3141 FORTUNE WAY SUITE 5	WELLINGTON FL 33414
SVD	PEPPER, RONALD A	3141 FORTUNE WAY SUITE 5	WELLINGTON FL 33414

200027622822  
01/26/04--01093--005 \*\*300.00

8. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI FL 33145

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date

11. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

04 JAN 26 AM 10:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



CR2E040 (7/03)

## **Cruise N' Cool**

3141 Fortune Way # 5

Wellington, Florida 33414

Office # (561) 383-5450 \* Fax # (561) 383-5452

E-Mail: [cruisencool@yahoo.com](mailto:cruisencool@yahoo.com)

See us on the Web: <http://www.cruisencool.com>

January 15, 2004

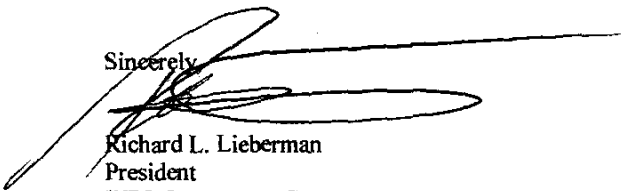
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

To whom it may concern;

As per our conversation with one of your phone representatives on January 14, 2004. As instructed I am returning this application and a check in the amount of \$300.00 to renew our corporation. The explanation for this letter is to affirm that we have never received the original application for this renewal. WBR Investment Corp is located in a warehouse complex with mutable mailboxes and it is not uncommon for mail to be misplaced and or delivered to wrong boxes.

We appreciate your efforts in reinstating and renewing our corporation. We apologize for any inconvenience this might have caused

Sincerely,



Richard L. Lieberman  
President  
WBR Investment Corp.