

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1072

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 AUG 18 PM 3:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000051892

1. Corporation Name
turningwest, inc

~~100410-1000000~~

2. Principal Office Address
10640 154th rd

Suite, Apt. #, etc.

City & State
jupiter, fl

Zip
33478

Country

3. Mailing Office Address
same

Suite, Apt. #, etc.

City & State
fl

Zip

Country

REINSTATEMENT 03-04

600040290096
08/18/04--01054--003 **300.00

4. Date Incorporated or Qualified
To Do Business in Florida 5/10/002

5. FEI Number

04-3665025

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
gary weinstein

Street Address (P.O. Box Number is Not Acceptable)
10640 154th rd n

Suite, Apt. #, Etc.

City
jupiter

State
FL

Zip Code
33478

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

[Signature]

REGISTERED AGENT MUST SIGN

Date 8/1/2004

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	GARY WEINSTEIN	SAME AS ABOVE	
VP	ANITA WEINSTEIN	SAME AS ABOVE	
SECY	RENA COHEN	SAME AS ABOVE	

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:

[Signature]

GARY WEINSTEIN

8/1/04

Date

5617443105

Daytime Phone #

CR2E081 (01/04)

2 of 2

TURNINGWEST INC
10640 154TH RD N
JUPITER FL, 33478

AUG 1, 2004

ENCLOSED PLEASE FIND CORPORATION REINSTATEMENT FORM.
I AM ASKING FOR A WAVER OF \$ 600.00 FEE DUE TO NEVER RECEIVING
ANY FORMS FROM STATE.
I AM INCLOSING 300.00 THAT I WAS TOLD BY YOUR OFFICE TO ENCLOSE
THANK YOU



GARY WEINSTEIN
PRESIDENT
561 744 3105

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA