

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000079368

1. Entity Name
WORLD AEROSPACE CONSULTING, INC.



FILED

05 SEP 23 PM 12:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
20 HUNTING LODGE CT
MIAMI SPRING, FL 33166

Mailing Address
20 HUNTING LODGE CT
MIAMI SPRING, FL 33166

2. Principal Place of Business
4990 NW. 25 STREET
Suite, Apt. #, etc.

3. Mailing Address
4990 N.W. 25 STREET
Suite, Apt. #, etc.



09192005 REIN-P CR2E098 (6/04)

City & State
Miami, FLORIDA
Zip
33122
Country

City & State
Miami, FLORIDA
Zip
33122
Country

4. FEI Number
27-0023383

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FERNANDEZ, CARLOS
20 HUNTING LODGE CT
MIAMI SPRINGS, FL 33166

7. Name and Address of New Registered Agent

Name
FERNANDEZ, CARLOS

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

5228 S.W. 195 TR

City MIRAMAR FL Zip Code 33029

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9/14/2005

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME FERNANDEZ, CARLOS
STREET ADDRESS 5228 SW 195 TR
CITY-ST-ZIP MIRAMAR, FL 33029

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 700060060877
CITY-ST-ZIP 09/29/05--01014--003 **300.00

TITLE DIRECTOR ☐ Change ☒ Addition
NAME JOAQUIN FERNANDEZ
STREET ADDRESS 458 S.E. 2ND STREET
CITY-ST-ZIP HIALEAH, FLORIDA 33010

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other name empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/14/2005 305 477-3886
Date Daytime Phone #