

# **2006 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000108106

Entity Name: WELTRANS, INC.

**FILED**  
**Oct 12, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

106 LUCKY WORLD CT. EAST  
DAVENPORT, FL 33897

**New Principal Place of Business:**

**Current Mailing Address:**

106 LUCKY WORLD CT. EAST  
DAVENPORT, FL 33897

**New Mailing Address:**

FEI Number: 75-3091252

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

WELSING, NORBERT J  
106 LUCKY WORLD CT. EAST  
DAVENPORT, FL 33897 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: NORBERT J. WELSING

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: O ( ) Delete  
Name: WELSING, NORBERT J  
Address: 106 LUCKY WORLD CT. EAST  
City-St-Zip: DAVENPORT, FL 33897

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NORBERT J. WELSING

Electronic Signature of Signing Officer or Director

DIRE

10/12/2006

Date