

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000000027

1. Entity Name
WAYSIDE MOTOR WORKS, INC.



FILED

07 FEB -8 AM 8:30

CLERK OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2066 NE 155TH STREET
NORTH MIAMI BEACH, FL 33162

Mailing Address
2066 NE 155TH STREET
NORTH MIAMI BEACH, FL 33162

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01252007 REIN-P CR2E098 (1/07)

City & State

City & State

4. FEI Number
06-1679362

Applied For
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RUMENS, KEITH C
2066 NE 155 STREET
NORTH MIAMI BEACH, FL 33162

Name

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

City

FL

Zip Code

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 *Keith C Rumens, President*

2/6/07

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
RUMENS, KEITH C
2066 NE 155 STREET
NORTH MIAMI BEACH, FL 33162

☐ Delete

TITLE
NAME
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CITY - ST - ZIP

REINSTATEMENT *06-07*

☐ Change ☐ Addition

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02/16/07--01004--025 **300.00

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 like empowered.

SIGNATURE: *Keith C Rumens, Pres.* *2/6/07* *(305) 945-8555*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #