

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P03000042158

1. Corporation Name

Web Aquatics, Inc.

2. Principal Office Address
1630 West Hillsborough Boulevard

3. Mailing Office Address
PO Box 66-9372

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Deerfield Beach, FL

City & State
Miami, FL

Zip
33442

Country
USA

Zip
33166

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida 04/15/2003

5. FEI Number
14-1880363

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
George L. Barriere

Street Address (P.O. Box Number is Not Acceptable)
1630 West Hillsborough Boulevard

Suite, Apt. #, Etc.

City
Deerfield Beach

State
FL

Zip Code
33442

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

George L. Barriere
REGISTERED AGENT MUST SIGN

Date 04/18/2006

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
P/S/T	George L. Barriere	5634 SW 89 Ave	Cooper City, FL 33328
			B 5/2/04
			04/2006

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 contained in Chapter 119, 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:

George L. Barriere
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George L. Barriere

04/18/2006

954-629-9903

Date

Daytime Phone #



PO Box 68-8372
Miami, Florida 33166

Payerw

April 20, 2006

Florida Department of State
Re: Corporation Reinstatement Fee
Document #P03000042158

Dear Sir or Madam:

The purpose of this letter is to request a waiver of the reinstatement fee for Web Aquatics, Inc. We incorporated on April of 2003 and have never received any type of notice of renewal.

We became aware that this needed to be done from our accountant who sent out a courtesy email to his corporate customers reminding us that the renewal is due by May first and provided a link to the website to complete this online. This is the first year he sent out this email. When we attempted to follow his instructions we found that the corporation had been dissolved and is inactive.

Our company has been conducting business since its inception and file corporate tax returns annually. We are enclosing a check for \$450.00 for 2004, 2005, and 2006, and ask that you waive our reinstatement fee.

Sincerely,

A handwritten signature in black ink, appearing to read "George Barriere".

George Barriere
President