

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000122965

FILED
Oct 27, 2006
Secretary of State

Entity Name: IMMANUEL WELLS & SAYKO, INC.

Current Principal Place of Business:

7719 HIGH PINE ROAD
ORLANDO, FL 32819 US

New Principal Place of Business:

Current Mailing Address:

7719 HIGH PINE ROAD
ORLANDO, FL 32819 US

New Mailing Address:

FEI Number: 20-0439571 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELLS, MICHAEL O
7719 HIGH PINE ROAD
ORLANDO, FL 32819 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: MICHAEL O WELLS

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: D () Delete
Name: WELLS, MICHAEL O
Address: 7719 HIGH PINE ROAD
City-St-Zip: ORLANDO, FL 32819 US

Title: D () Delete
Name: SAYKO, DAVID J
Address: 2403 LAUDERDALE CT
City-St-Zip: ORLANDO, FL 32805 US

Title: P () Delete
Name: WELLS, MICHAEL O
Address: 7719 HIGH PINE RD
City-St-Zip: ORLANDO, FL 32819 US

Title: VP () Delete
Name: SAYKO, DAVID J
Address: 2403 LAUDERDALE CT
City-St-Zip: ORLANDO, FL 32805 US

Title: S () Delete
Name: SAYKO, DAVID J
Address: 2403 LAUDERDALE CT
City-St-Zip: ORLANDO, FL 32805 US

Title: T () Delete
Name: SAYKO, DAVID J
Address: 2403 LAUDERDALE CT
City-St-Zip: ORLANDO, FL 32805 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: MICHAEL O WELLS

Electronic Signature of Signing Officer or Director

PRES

10/27/2006

Date