

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P04000033281

1. Corporation Name

KING'S WAY SOLUTIONS, INC.

2. Principal Office Address

2920 WOODPINE CT

Suite, Apt. #, etc.

City & State

SARASOTA, FLORIDA

Zip

34231

Country

U.S.A.

3. Mailing Office Address

2920 WOODPINE CT

Suite, Apt. #, etc.

City & State

SARASOTA, FLORIDA

Zip

34231

Country

U.S.A.

FILED

05 DEC 30 AM 8:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100063304261
01/10/06--01018--018 **150.00

REINSTATEMENT

05

**4. Date Incorporated or Qualified
To Do Business in Florida**

02/16/04

5. FEI Number

20-0732750

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

BRENT J. MYERS

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

3333 CLARK ROAD

Suite, Apt. #, Etc.

SUITE 100

City

SARASOTA

State

FL

Zip Code

34231

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

[Signature]
REGISTERED AGENT MUST SIGN

Date

12/27/05

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 |
|--------|--------------------------------------|---|--------------------|
| D | LADD, JON | 2920 WOODPINE CT | SARASOTA, FL 34231 |
| | | | |
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| | | | |
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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 under section 119.07(3)(f), 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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/27/05

Daytime Phone #

2 of 2

KING'S WAY SOLUTIONS, INC.
2920 Woodpine Ct.
Sarasota, Florida 34231

December 22, 2005

DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, Florida 32314

Re: Annual Uniform Business Report, 2005
F.E.I.N. 20-0732750

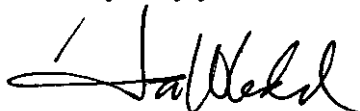
Dear Sir/Madam:

Our report was not filed in a timely manner due to never receiving notice from the State regarding the 2005 Annual Uniform Business Report. Enclosed please find our check in the amount of \$150.00 to cover the original filing fee along with our report.

Please notify us of your response to this letter in writing to the above address.

Thank you for your consideration and assistance in this matter.

Very truly yours,



Jon Ladd
Enclosures