

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P04000084120

1. Corporation Name

ALW & ASSOCIATES, INC.

2. Principal Office Address - No P.O. Box #
5264 SW 159th Avenue

3. Mailing Office Address
5264 SW 159th Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Miramar, Florida

City & State
Miramar, Florida

Zip
33027

Country

Zip
33027

Country

7. Name and Address of Current Registered Agent

Name
SPIEGEL & UTRERA, P.A.

Street Address (P.O. Box Number is Not Acceptable)
1840 Southwest 22nd Street

Suite, Apt. #, Etc.
4th Floor

City
Miami

State
FL

Zip Code
33145

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.
SPIEGEL & UTRERA, P.A.

Signature of
Registered Agent By: *Natalia Utrera*

Natalia Utrera, Vice President

REGISTERED AGENT MUST SIGN

Date

9-28-07

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
PVSTD	Wilfolk, Andrew	5264 SW 159th Avenue	Miramar, Florida 33027

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
07 OCT -2 AM 7:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
REINSTATEMENT
05-07
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G. Mitchell OCT 2 2007