

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

108

CORPORATION  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Kathleen Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

01 AUG -3 PM 12:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # PA5000076941

1. Corporation Name

Kenneth Weston & Associates, Inc.

2. Principal Office Address

7765 SW 87 Avenue

3. Mailing Office Address

7765 SW 87 Avenue

Suite, Apt. #, etc.

Suite 100

Suite, Apt. #, etc.

Suite 100

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33173

Country

Dade

Zip

33173

Country

Dade

4. Date Incorporated or Qualified  
To Do Business in Florida

10/02/1995

5. FEI Number

65-0624952

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

BROWN, Mackay B. Esq. White & Brown, P.A.

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

9000 SW 152 Street

Suite, Apt. #, Etc.

Suite 102

City

Miami

State

FL

Zip Code

33157

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

Date 8/2/01

REGISTERED AGENT MUST SIGN

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	Weston, Kenneth A.	7765 SW 87 Ave., #100	Miami, Fl. 33173
	201.25-AR		
	10.00-ARARTS		
	88.75-ARsupp		
	8.75-Cent		LS

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)(i), 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

8/1/01

Date

305-279-2700

Daytime Phone #

CR2E081 (9/00)



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7765 S.W. 87th Avenue, Suite 100, Miami, FL 33173 • (305) 279-2700 • Fax: (305) 595-5866

August 1, 2001

Department of State  
Division of Corporations  
409 East Gaines St.  
Tallahassee, Fl. 32399  
VIA AIRBORNE EXPRESS

RE: Kenneth Weston and Associates, Inc.  
Tax I.D.# 65-0624952

Upon notification this morning from my accountant that our corporation fees had not been paid for the years 2000 and 2001, we contacted your reinstatement department for instructions on re-activating our corporate status. Your records indicate that all correspondence intended for my company during that time was returned to you by the postal service as "undeliverable". Therefore we never received notice of renewal, nor did we receive notice of dissolution.

Enclosed please find check #4180 in the amount of \$308.75 as payment in full for filing fees (\$300.00) and a Certificate of Status (\$8.75) for the years 2000 and 2001, as per instruction from your reinstatement department. We were informed that there would be no additional reinstatement fees, as per your records of non-delivery.

It is my understanding that upon receipt of the enclosed payment our corporate status will be changed from inactive to active. In addition, please note our current address to insure that we receive all future correspondence.

Sincerely,

KENNETH WESTON & ASSOCIATES, INC.

Kenneth A. Weston  
President

*Signed in the absence of Mr. Weston to expedite delivery*

Kenneth Weston & Associates, Inc.  
7765 SW 87<sup>th</sup> Avenue, Suite 100  
Miami, Florida 33173

KAW/sp  
Enclosure

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