


2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED

04 NOV 18 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # P96000034972		
1. Entity Name RONALD WEINER, P.A.		
Principal Place of Business 11269 OKEECHBEE BLVD ROYAL BEACH, FL 32411		Mailing Address 11269 OKEECHBEE BLVD ROYAL BEACH, FL 32411



2. Principal Place of Business 11369 Okeechobee Blvd Suite, Apt. #, etc. 400		3. Mailing Address 11369 Okeechobee Blvd Suite, Apt. #, etc. 400	
City & State Royal Palm Beach, FL		City & State Royal Palm Beach, FL	
Zip 33411	Country USA	Zip 33411	Country USA

REINSTATEMENT 04

6. Name and Address of Current Registered Agent WEINER, RONALD PA 11440 OKEECHOBEE BLVD. STE 207 ROYAL PALM BEACH, FL 33411		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 11369 Okeechobee Blvd #400 City Royal Palm Beach FL Zip Code 33411	
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Ronald Weiner Ronald Weiner President 11/15/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2005, Fee will be \$300.00

In accordance with s=607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WEINER, RONALD 14557 STIRRUP LANE WELLINGTON, FL 33414 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11/30/04--01056--022 **150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ronald Weiner Ronald Weiner 11/15/04 561-795-3269
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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ROBERT S. NUTTER

CERTIFIED PUBLIC ACCOUNTANT, P.A.

4152 West Blue Heron Boulevard, Suite 122
Riviera Beach, Florida 33404-4859

(561) 845-1232

FAX (561) 840-1913

October 28, 2004

Florida Department of Revenue
Division of Corporation
PO Box 6327
Tallahassee, FL 32314

Re: Ronald Weiner, PA
P96000034972

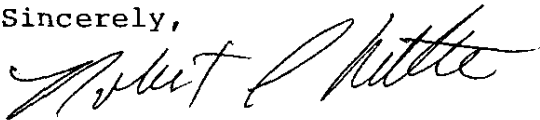
Dear Sir or Madam:

My above mentioned client has asked me to respond to your notice of dissolution or revocation, a copy of which is attached. The corporate officer never remembers receiving the card for filing the annual fee, which was new this year, and thus, the reason the form was not filed and the fee not paid. Please also note the correct corporate address is 11369 Okeechobee Blvd., #400 and not 11269 Okeechobee Blvd., which is on the card and may explain why the original notice was not received.

I have taken steps to assure it will not happen in the future, and per the corporation's past history of timely filing, I request you reinstate the corporation without penalty.

Enclosed please find a check for \$150 for the annual fee. Thank you for your time and consideration.

Sincerely,



Robert S. Nutter, CPA

c: Ronald Weiner