`PLEASE READ	ALL INSTRUCTIONS	BEFORE C	COMPLETING THIS FORM.
APPLICATION	FLORIDA DEPARTME Katherine H		APPROVEL AND
FOR	Recretary of	State	HILED W
REINSTATEMENT COMPONENTIONS			00 OCT 27 PM 4: 05
DOCUMENT # P9600090228 1. Corporation Name			SECRETARY OF STATE TALLAHASSEE, FLORIDA
WLS, INC.			TALLA PROCE, 1 LONG.
Principal Place of Business	Mailing Address		
9500 S DADELAND BLVD #702 MIAMI FL 33156 US	9500 S DADELAND BLVD #702 Miami FL 33156 US		
If above addresses are incorrect in any way, line the 2. New Principal Office Address, If Applicable	rough incorrect information and enter 3. New Mailing Office Address:	correction below.	Date Incorporated or Qualified To Do Business in Florida 11/04/1996
Suite Apt. #, etc.	Suite Apt. #, etc. # 200	01	5. FEI Number Applied For
City Plate Crest, FL	City a State TIRECVEST, FL		6. \$8.75 Additional Fee requires
2ip 33156 Country	Zip 33156 Count	ί <u>ζ</u> η	CERTIFICATE OF STATUS DESIRED 60.73 Additional Fee required for a Certificate of Status
Names and Street Addresses of Each Officer and Name of Officers		rations must list at lea	th
Title(s) and/or Directors 1 2	3	Officer and/or Director	4
PTD LARKIN, JEREMY	95 00 S DADEL 9655 - Sco	AND BLVD STE 70	they 200 MIAMIFE Process FL 33156
VSD SCHMIDT, EDWARD L	9500 S DADEL 9655 - 500	AND BLVD STE 70	way Sute # 200 Rivered, FL 33156
		•	60000 <u>3463566</u> -8
			-11715/0001003016 ****150.00 *****450.00
			MA
	Ĺ		
8. Name and Address of Current Registered Agent		Name	Name and Address of New Registered Agent
LARKIN, JEREMY S		Street Address ((P.O. Box Number is Not Acceptable)
9500 S DADELAND BLVD STE 702 MIAMI FL 33156		Street Address (P.O. Box Number is Not Acceptable) Suite, And #, Etc. Suite, State Zip Code,	
Signature of Registered Agent SIG	JURE REQUERES TERES AGENT MUST SIGN	UIRED	Date
this reinstatement application, the reader for dis owed by the corporation have been paid and the	solution has been eliminated, the cor e <u>na</u> mes of individuals listed on this fo	porate name satisfies orm do not qualify for	s provided for in chapter 607 or 617, F.S. I further certify that when filing as the requirements of section 607.0401 or 617.0401, F.S., that all fees or an exemption under section 119.07(3)(i), F.S. The information indicated ler nath
on this application is true and accurate, and my	agripulie Shall have the same legal e	meet as II made dilde	x 102
SIGNATURE: SIGNATURE AND TYPED OR P	URE REQUI		10/24/00 305-670-2900 Daytime Prone #





LICENSED REAL ESTATE BROKERS

LICENSED MORTGAGE BROKERS

October 24, 2000

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Re:

FEIN #65-0717162

WLS, Inc.

To Whom It May Concern:

We respectfully request that the reinstatement fee and penalties for the 2000 corporation annual report be waived for the above referenced corporation. We were in the process of moving and encountered problems with the post office in forwarding our mail.

We are enclosing a check for the original fee of \$150.00 for the annual report. We thank you for your assistance in this matter. Should you have any questions, please contact me at (305) 670-2900.

Jeremy S. Larkin President

Enclosures