

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED  
AND  
FILED

02 FEB -5 PM 2:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **97006028668**

1. Corporation Name

**W & A. M. T. O. Please Motors, Inc.**

2. Principal Office Address

**8945 NW 7th Ave**

Suite, Apt. #, etc.

City & State

**Miami FL**

Zip

**33150**

Country

**U.S**

3. Mailing Office Address

**8945 NW 7th Ave.**

Suite, Apt. #, etc.

City & State

**Miami FL**

Zip

**33150**

Country

**U.S**

4. Date Incorporated or Qualified  
To Do Business in Florida

**3/31/1997**

5. FEI Number

**650738807**

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

**Lester Turner**

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

**8945 NW 7th Ave**

Suite, Apt. #, Etc.

City

**Miami**

State

**FL**

Zip Code

**33150**

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

**Lester Turner**

REGISTERED AGENT MUST SIGN

Date **01 31 - 2002**

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip |
|--------|--------------------------------------|---|--------------------|
| PD     | Lester Turner                        | 1147 NW 46 St                                     | Miami FL 33127     |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   |                    |

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:

**Lester Turner**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**02-05-2002- 305-4575444**

Date

Daytime Phone #

CR2E081 (9/01)

January 31, 2002

We Aim To Please Motor, Inc.  
8945 N.W. 7<sup>th</sup> Ave.  
Miami, FL 33150

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

Dear Sir,

A review of the Florida Department of State, Division of Corporation web site indicated that the status of We Aim To Please Motors, Inc. (Document # P9700028668, FEI#: 650738807) is inactive. I have not received the Annual Report notice and hereby request the reinstatement fees be waived.

Attached is Corporation Reinstatement Application, which include the amount I owed for 1999-2002 in the amount of \$600.00.

I hereby request that all future correspondence be sent to the Principle Office address: 8945 N.W. 7<sup>th</sup> Ave, Miami, FL 33150.

Thank you in advance,

  
Lester Turner