

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

DOCUMENT # P97000055367

1. Corporation Name

WORLD SALES & LEASING, INC.

Principal Place of Business

982 THORPE RD.
ORLANDO FL 32824

Mailing Address

982 THORPE RD.
ORLANDO FL 32824

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

06/23/1997

5. FEI Number

59-3457457
1998-1999

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$6.75 Additional Fee required for a Certificate of Status

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

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
D	WADDELL, DANIEL	6107 DEL MAR DR.	PORT ORANGE FL 32127

8. Name and Address of Current Registered Agent

WADDELL, DANIEL
982 THORPE RD.
ORLANDO FL 32824

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date: 11-13-98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☐ No ☒

(See other side for information on intangible tax.)

12. 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

11-13-98 407-855-7286

(2)

To Whom It May Concern:

This is to notify you that I Dan Waddell never received any documents of cancellation of corporation prior to this notice. In the past all documents were sent directly to my accountant in which I now understand that he has not filed the necessary paperwork accordingly. I sincerely apologize for the mix-up. I am hereby giving a new address in which to send all documents to. At this address I will receive these documents personally and will prepare them accordingly. I therefore request your cooperation in this matter. I am enclosing a check for \$150.00 dollars for the reapplication fee according to the conversation I had with Tyrone, an employee of yours, on the morning of Nov. 13, 1998 at 9:45 am. I am currently in the process of finding a new accountant in the hopes that this will never happen again. I sincerely regret the negligence on my behalf and I assure you that in the future everything will be completed in a timely manner. Please send all documents to the following address:
6107 Delmar Drive, Port Orange, Fla 32127. Thank you for your cooperation.

Dan Waddell

