PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **P97000060329**

1. Corporation Name

WEATHER SITE, INC.

Principal Place of Business

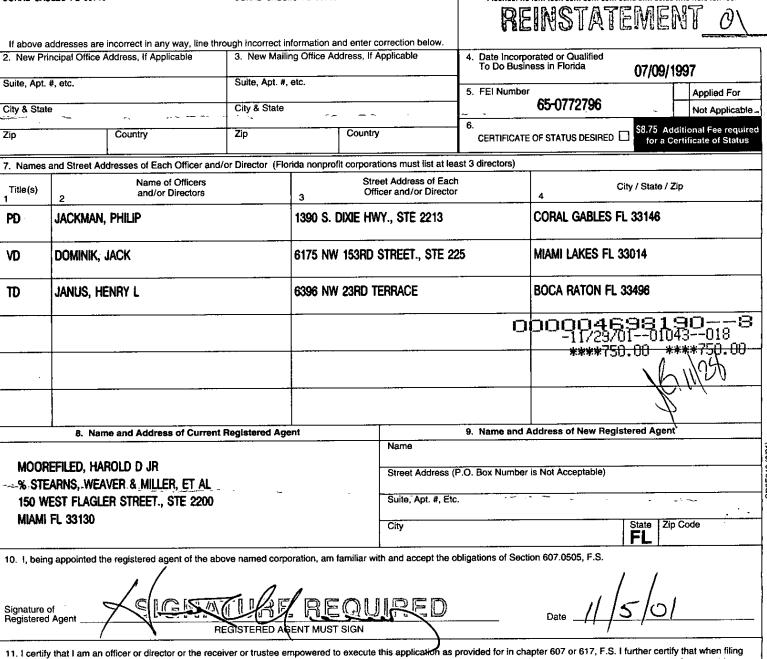
Mailing Address

1390 S. DIXIE HWY., STE 2213 CORAL GABLES FL 33146

SIGNATURE

Tigining / Tagliogo

1390 S. DIXIE HWY.. STE 2213 CORAL GABLES FL 33146 OI NOV -7 PH 4:57



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.