

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # S35693

1. Corporation Name

W & A UPHOLSTERY & INTERIORS, INC.

Principal Place of Business

Mailing Address

4558 N HIATUS RD
SUNRISE FL 33351

4558 N HIATUS RD
SUNRISE FL 33351

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

02/28/1991

5. FEI Number

65-0244503

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P	TORRES, WILSON	4558 N HIATUS RD	SUNRISE FL 33351

000024580160
11/12/03--01010--022 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

TORRES, WILSON
4558 N HIATUS RD
SUNRISE FL 33351

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. or 617.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 11/7/03

11. 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

Date

Daytime Phone #

FILED

03 NOV 12 AM 10:26

SECRETARY OF STATE
TALLAHASSEE FLORIDA

REINSTATEMENT

CR2E040 (7/03)

W & A Upholstery & Interiors, Inc.
4558 N. Hiatus Road
Sunrise, FL 33351

October 7, 2003

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

**Re: W & A Upholstery & Interiors, Inc. –
Corporation Reinstatement**

Ladies and Gentlemen:

W & A Upholstery & Interiors, Inc. was unable to file the appropriate documentation for renewal of the corporation because there was an injury to my arm and I had to have surgery which required a long recovery process. Because of this situation, I was out of the shop and unable to attend to business and there was a delay in W & A Upholstery & Interiors, Inc.'s corporation filing.

I am writing this letter to you, to ask for you waive the \$450 penalty due to the delay and adjust the filing fee to be \$150.

Thank you for your assistance in this regard, should you have any questions, please do not hesitate to let me know.

Sincerely,



Wilson Torres,
President