PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

REIN	RPORATIC STATEME JMENT	ENT 2002/2	Katheri Secretai DIVISION OF C	RIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS FARMSICEL SCIENCE, INC.		FILED O1 MAR -6 PM 3.51 SECRETARY OF STATE TALLAHASSEE, FLORIDA
	FIRST	<u>.</u>	3. Mailing Office Addr			- LONDA
2279	Soutes V	DR.	13279 Soutes	DR.		
Tackson Ville Fda. Jacks uite, Apt. #, etc.			Suite, Api. #, etc.			orated or Qualified ess in Florida
ity & State			City & State			
<u> </u>					NOT APP	
ip		Country	Zip	Country	6	OF STATUS DESIRED \$8.75 Additional Fee requir for a Certificate of Status
			7. Name and	Address of Current Registe	ered Agent	
i) *	Jackson VILLE					10003827833
ignature o	of Agent <u>R</u>	w.flmR-4	ALON REGISTERED AGENT MUS			n 607.0505 or 617.0503, F.S. Date <i>Mak. 2, 200</i>
Titles	S and outcorre	Name of Officers and/or Director		Street Address of Each Officer and/or Director		City / State / Zip
				3265 SOLUTEL DR.		
グレ	DYSON, JOHN R. REV.		Rev. Tree	THE MEMILIAL WOURDED		·
7	Dyson, Karen		326	3265 SOUTAL DR. 987 AZALAZ LAI. 1636 W. 16TH. ST. 2040 WELLS Rd. APT. # JOK		Jacksonville, Fla.
<u> </u>	Flance	gaar, SHERR, eson, Elliot	VL. 987,	987 AzaLea La.		Fernandina FLA.
)			m. 1630	1636 W. 16TH. ST.		Jackson VILLA, FLA.
Lester, Kathy F.			E. 204	2040 WELLS Rd. APT. # 10		ORONGE PARK FLA. 32073
this re owed	einstatement ap	plication, the reason for dis tion have been paid and the	ssolution has been eliminate e names of individuats listed	ed, the corporate name satisf	ies the requirements or an exemption unde	pter 607 or 617, F.S. I further certify that when filing of section 607.0401 or 617.0401, F.S., that all fees er section 119.07(3)(i), F.S. The information indicated