

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1081

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 JUL 29 PM 1:35

DOCUMENT # F02000005125

1. Corporation Name *MISSISSIPPI*  
ChemTechnologies of ~~MS~~, Incorporated

208 South Whitworth Street  
Post Office Box 1004

**REINSTATEMENT** 03-04

2. Principal Office Address  
208 South Whitworth Street

3. Mailing Office Address  
Post Office Box 1004

Suite, Apt. #, etc.  
Suite 3

Suite, Apt. #, etc.

City & State  
Brookhaven, Mississippi

City & State  
Brookhaven, Mississippi

Zip Country  
39601 USA

Zip Country  
39602 USA

4. Date Incorporated or Qualified  
To Do Business in Florida July- 2002

5. FEI Number  
72-1366258

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  
Kevin B. Anaston

Street Address (P.O. Box Number is Not Acceptable)  
4440 Soundside Drive

900039910089  
08/05/04--01056--007 \*\*308.75

Suite, Apt. #, Etc.

City  
GulfBreeze

State Zip Code  
FL 32563

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

*Kevin B. Anaston*

Date 07/28/04

REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/T	Martin C. Stephens	772 Marwood Loop	Bogue Chitto, MS 39629
VP/S	Carolyn Stephens	772 Marwood Loop	Bogue Chitto, MS 39629

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:

*MARTIN C. STEPHENS, PRESIDENT*  
*MC Stephens*

07/28/04

601-833-0403

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (01/04)



ChemTechnologies  
P.O. Box 1004  
Brookhaven, MS  
39602

1-800-793-7274

July 28, 2004

To Whom It May Concern:

Please be advised that for some unknown reason, ChemTechnologies of MS, Inc., never received the **CORPORATION ANNUAL REPORT** to be completed and filed with the Secretary of State in the State of Florida for the years 2003 and 2004.

I am requesting that you please reinstate our Authorization to Transact Business in the State of Florida and am enclosing a check for \$300.00 along with the proper filing forms.

Please consider waiving the \$600.00 penalty, as these were never received at our Post Office address. In the future, please mail to: **208 South Whitworth Street, Brookhaven, MS 39602 - ATTN: Angie Spencer.**

An additional \$8.75 is included for a certificate to be mailed to **Kevin B. Anaston, 4440 Soundside Drive, GulfBreeze, Florida 32563.**

Please feel free to call if you have any questions.

Best regards,

Martin C. Stephens, President  
ChemTechnologies of MS, Inc.