

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F08000002534

**FILED**  
**Oct 18, 2010**  
**Secretary of State**

**Entity Name:** ECO-SANITARY SOLUTIONS, INC.

**Current Principal Place of Business:**

1350 SW BILTMORE ST.  
PORT ST. LUCIE, FL 34983

**New Principal Place of Business:**

1520 SE NIEMEYER CIRCLE  
SUITE 5  
PORT ST. LUCIE, FL 34952

**Current Mailing Address:**

1350 SW BILTMORE ST.  
PORT ST. LUCIE, FL 34983

**New Mailing Address:**

1520 SE NIEMEYER CIRCLE  
SUITE 5  
PORT ST. LUCIE, FL 34952

**FEI Number:** 26-2548073

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

COMPERCHIO, DAVID  
1350 SW BILTMORE ST.  
PORT ST. LUCIE, FL 34983 US

**Name and Address of New Registered Agent:**

COMPERCHIO, KRYSTEN  
1520 SE NIEMEYER CIRCLE  
PORT ST. LUCIE,, FL 34952 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** KRYSTEN COMPERCHIO

10/18/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** COMPERCHIO, KRYSTEN M  
**Address:** 1520 SE NIEMEYER CIRCLE  
**City-St-Zip:** PORT ST. LUCIE, FL 34952

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** KRYSTEN COMPERCHIO

PRES

10/18/2010

Electronic Signature of Signing Officer or Director

Date