

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FLORIDA DEPARTMENT OF STATE  
F93000000028

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

DOCUMENT # F93000000028

98 MAR 12 PM 1:10

Mercury Technologies Corporation

1. Mailing Address		2. New Mailing Office Address, if Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
44 ORINDA VIEW ROAD		36 GOLDMINE ROAD		1/5/93	
ORINDA CA		FLANDERS, NJ		5. FEI Number	
94563-1233		07836		94-3030631	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

1. Name of Officers and/or Directors	2. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	3. City, State / Zip
PRES PATRICK J. PERKINS	44 ORINDA VIEW ROAD	ORINDA CA 94563
V-P IRA E. KAUFER	267 PASEO BARNAI	MORAGA CA 94556
V-P ROY FARMER, III	6 miles up DELMAGE Road Whitebird ID	83554

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
Advanced ENVIRONMENTAL Recycling Corp. of Florida 4317 L Fortune Place WEST MELBOURNE, FL 32934		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State FL Zip Code	
Signature of Registered Agent		Date	
		3-3-99	

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes  No  (See other side for information on intangible tax.)

12. 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: 2/18/98 510-284-2280  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: PATRICK J. PERKINS Date: 2/18/98 Daytime Phone #: 510-284-2280