

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

DIVISION OF CORPORATIONS

FILED
03 NOV -4 AM 10:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F95000005065**

1. Corporation Name

PCA ENGINEERING, INC.

Principal Place of Business

Mailing Address

430 MONTCLAIR AVE
POMPTON LAKES NJ 07442

430 MONTCLAIR AVE
POMPTON LAKES NJ 07442

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

REINSTATEMENT

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

10/18/1995

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

22-1688452

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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	KOPUT, DAN	937 SOUTH MAIN ST	PLANTVILLE CT 06479
V	RUECKEL, JOHN	39 ORCHARD STREET	HAMBURG NJ 07419
P	KOGUT, JOYCE	189 ATWATER STREET	PLANTVILLE, CT 06479

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11/04/03--01012--004 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PHILLIPS, WALTER
543 59TH WAY
S. ST PETERSBURG FL 33707

Name

ROBERT PHILLIPS

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

518 60TH STREET SOUTH

Suite, Apt. #, Etc.

City

ST. PETERSBURG

State

FL

Zip Code

33707

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

Walter Phillips

Date

10/29/03

REGISTERED AGENT MUST SIGN

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:

Walter Phillips
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/27/03
Date

973 616-4501
Daytime Phone #

CR20040 (7/03)



PCA ENGINEERING, INC.

430 MONTCLAIR AVENUE • P.O. BOX 196 • POMPTON LAKES, NEW JERSEY 07442

Telephone: 973-616-4501 • Toll Free: 1-800-666-PCA1 • Fax: 973-616-4451

Regional Offices in MA, PA, NC, FL & VA

ENGINEERING • CORROSION TESTING & MATERIALS • DIVING • ENVIRONMENTAL SERVICES

October 27, 2003

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

Re: Uniform Business Report
Application for Reinstatement
Document No. 95000005065

To Whom It May Concern:

Please note, PCA Engineering, Inc. did not receive any notices from the State of Florida requesting the renewal of the Uniform Business Report.

We are, therefore, requesting that the reinstatement fee be waived without penalty.

If you should have any questions or if additional information is required, please do not hesitate to contact us.

Very truly yours,

PCA ENGINEERING, INC.

A handwritten signature in black ink, appearing to read 'John R. Rueckel', is written over the typed name.

JOHN R. RUECKEL
VICE PRESIDENT/GENERAL MGR.

JRR:jah