

L01000010723

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 SEP -5 PM 12:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L01000010723

1. Corporation Name

MILLENIUM WATER PRODUCTS, LLC.

2. Principal Office Address

10305 NW. 41ST STREET

Suite, Apt. #, etc.

126

City & State

MIAMI, FL.

Zip

33178

Country

U.S.A.

3. Mailing Office Address

10305 NW. 41ST STREET

Suite, Apt. #, etc.

126

City & State

MIAMI, FL.

Zip

33178

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

JULY 3, 2001

5. FEI Number:

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

JULIO VALLEJO

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

10305 NW. 41ST STREET

07/21/03--01043--001

***00.00

Suite, Apt. #, Etc.

126

City

MIAMI

State

FL

Zip Code

33178

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

Julio Vallejo

REGISTERED AGENT MUST SIGN

Date

04/30/03

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 |
|--------|--------------------------------------|---|-------------------------|
| D m6rm | ALBERT DE ROJAS JR. | 4358 FOXTAIL LANE | WESTON, FL. 33331 |
| D m6rm | ALBERTO DE ROJAS SR. | 1541 GARCIA AVENUE | CORAL GABLES, FL. 33146 |
| D m6rm | STEVE CALDERON | 6475 SW. 94TH STREET | MIAMI, FL. 33156 |
| D m6rm | DAVID CALDERON | 10305 NW. 41ST STREET, SUITE 126 | MIAMI, FL. 33178 |
| D m6rm | JULIO VALLEJO | 10305 NW. 41ST STREET, SUITE 126 | MIAMI, FL. 33178 |

REINSTATEMENT

02-03

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/19/03

Date

(305) 888 2211

Daytime Phone #

CR2E081 (10/02)