

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

~~CORPORATION~~  
~~REINSTATEMENT~~



FLORIDA DEPARTMENT OF REVENUE  
Katherine Jackson  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
00 FEB 21 AM 11:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L58866

1. Corporation Name  
Prochem of America, Inc.

2. Principal Office Address  
3300 University Drive

Suite, Apt. #, etc.  
Suite 305

City & State  
Coral Springs, FL

Zip Country  
33065 USA

3. Mailing Office Address  
3300 University Drive

Suite, Apt. #, etc.  
Suite 305

City & State  
Coral Springs, FL

Zip Country  
33065 USA

4. Date Incorporated or Qualified  
To Do Business in Florida 3-21-90

5. FEI Number  
65-0184675

Applied For  
Not Applicable

6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status

SP

7. Name and Address of Current Registered Agent

Name  
Alan Rosenthal CPA

Street Address (P.O. Box Number is Not Acceptable)  
3300 University Drive

Suite, Apt. #, Etc.  
Suite #305

City  
Coral Springs

State Zip Code  
FL 33065

000003157110-2  
-03/03/00--01104--020  
\*\*\*\*308.75 \*\*\*\*308.75

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 Alan Rosenthal CPA Date 1/27/00  
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/S	Rolf R. Bosshardt	2 Rue Honore Labande	MC 98000 Monaco

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: R. Bosshardt R. BOSSHARDT Date 2/4/2000 (954) 752 4013  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E081 (9/99)

# ALAN H. ROSENTHAL

CERTIFIED PUBLIC ACCOUNTANT, P.A.

L58866

3300 UNIVERSITY DRIVE  
SUITE 305  
CORAL SPRINGS, FLORIDA 33065  
(954) 752-4013  
FAX (954) 752-5610

MEMBER  
FLORIDA INSTITUTE OF  
CERTIFIED PUBLIC ACCOUNTANTS  
AMERICAN INSTITUTE OF  
CERTIFIED PUBLIC ACCOUNTANTS

Reinstatement Section:

January 27, 2000

Attached please find a request to reinstate Prochem of America, Inc.  
Enclosed is a check for \$ 308.75 to cover the years 1999&2000, plus a  
~~Certificate of Status.~~ We ask that the reinstatement fees be waived due  
to an error on the part of the state. An annual report was never received  
as the suite number was recorded as # 325. The correct number as shown on  
the prior reinstatement is # 305. Please change accordingly.  
Refer any questions or problems to Alan Rosenthal CPA P.A registered agent



Alan Rosenthal C.P.A.