PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION** Sandra B. Mortham FOR Secretary of State FII ED REINSTATEMENT DIVISION OF CORPORATIONS DOCUMENT # L64752 99 SEP 14 AM 2: 23 1. Corporation Name SECREMARY OF STATE TALLAHASSEE, FLORIDA HYDRO-TECH A LEAK DETECTION SERVICE COMPANY Principal Prace of Business Mailing Address 508 S.MILITARY TRAIL DEERFIELD BEACH, FL 33442 the same If above addresses are incorrect in any way, fine through incorrect information and enter correction below 3. New Mailing Office Address, If Applicable 2. New Principal Office Address, If Applicable Date Incorporated or Qualified
To Do Business in Florida same a<u>s above</u> Same as #2 Suite, Apt. #, etc. 04/12/1990 State: Apt. #, ctc 5. FEI Number Applied For City & State City & State 65-0188676 Not Applicable \$8.75 Additional Fee required for a Certificate of Status  $Z\varphi$ Country Country CERTIFICATE OF STATUS DESIRED 7 Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) Name of Officers and/or Directors Titoris) City / State / Zip P EARL E.KING 508 S. Military Trail Deerfield Beach,FL 33442 <del>800002989458--3</del> -09/17/99--01004--015 \*\*\*\*908.75 \*\*\*\*908.75 REMSTATEMENT -09/17/99--01004--015 \*\*\*\*908.75 \*\*\*\*908.75 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Earl E. King 508 S. Military Trail Street Address (P.O. Box Number is Not Acceptable) Deerfield Beach, FL 33442 Suite, Apt. #, Etc. State Zip Code 10. It being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Brighstelect Age it Date \_ GISTERED AGENT MUST SIGN 11. This corporation owes or has paid the current year (See other side for information on intangible tax.) Intangible Personal Property tax due June 30. Yes L. 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 reinstallement 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 or this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

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