

2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED

2006 NOV -3 PM 2:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000062403

1. Entity Name
APPLIED NITROUS TECHNOLOGY, INC.



Principal Place of Business

4517 GEORGE RD
STE 230
TAMPA, FL 33634 US

Mailing Address

4517 GEORGE RD
STE 230
TAMPA, FL 33634 US

2. Principal Place of Business

2269 East Main St
Suite, Apt. #, etc.

3. Mailing Address

2269 East Main Street
Suite, Apt. #, etc.

City & State

Rogersville TN

City & State

Rogersville TN

Zip

37857

Country

HAWKINS

Zip

37857

Country

Hawkins

10232006

REIN-P

CR2E088 (11/05)

4. FEI Number

69-3663577

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MOORE, STEVEN W
8200 BRYAN DAIRY RD
STE 300
CLEARWATER, FL 33777

7. Name and Address of New Registered Agent

Name: Barry Williamson, Stolberg Townsend & Gonzalez, PA
Street Address (P.O. Box Number is Not Acceptable):
2503 West Swan Avenue
Byron E. Townsend, Esquire
City: Tampa FL Zip Code: 33609

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, the registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agents signatures required when reinstating)

DATE

10/25/06

FILE NOW! FEE IS \$150.00

After January 1, 2007, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: P
NAME: PROCK, JEFFREY
STREET ADDRESS: 24781 LAUREL RIDGE DR
CITY-ST-ZIP: LUTZ, FL 33559

TITLE: President and Director
NAME: Jeffrey A. Prock
STREET ADDRESS: 2269 East Main Street
CITY-ST-ZIP: Rogersville, TN 37857

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: Secretary and Director
NAME: Deborah M. Picik
STREET ADDRESS: 2269 East Main Street
CITY-ST-ZIP: Rogersville, TN 37857

TITLE:
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STREET ADDRESS:
CITY-ST-ZIP:

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #