

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 OCT 13 AM 9:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000018392

1. Corporation Name

ENVIRONMENTAL SOLUTIONS INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

107 N LINE DR. SUITE 103
APOPKA FL 32703

107 N LINE DR. SUITE 103
APOPKA FL 32703

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

02/18/2001

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3701170

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)

| Title(s) 1 | Name of Officers and/or Directors 2 | Street Address of Each Officer and/or Director 3 | City / State / Zip 4 |
|---------------|---|--|-------------------------|
| D | CAIN, LEE | 116 LEDBURY DR | LONGWOOD FL 32779 |
| D | LANE, FRED | 6300 FLORIDA AVE | NEWPORT RICHEY FL 34653 |
| | | | |
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| | | | |
| | | | |

200023752592

10/13/03-01074-022 **158.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LANE, FRED
107 N LINE DR, SUITE 103
APOPKA FL 32703

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date 10-8-03

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-8-03

Date

407-861608

Daytime Phone #

CR2E040 (7/03)



Environmental Solutions International, Inc.

Specializing in the water & wastewater industry

"For ALL of your Environmental Needs!"

October 8, 2003

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

Subject: Document #P01000018392, Environmental Solutions International, Inc.

To Whom It May Concern:

Enclosed you will find our Application for Reinstatement for our corporation which was received by our office on this date. A check in the amount of \$150.00 has been included.

Per instructions, this letter will verify that the prior applications have not been received, at this office. The local post office has been notorious for lost mail, and is the only explanation that can be given.

If you should need further information, please do not hesitate to contact either myself or Donna King at 407-786-1668.

Sincerely,

Lee Cain
Environmental Solutions International, Inc.

