

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 OCT 16 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **PO1600103335**

1. Corporation Name

Aquatec Systems, Inc.

2. Principal Office Address

3141 Fortune Way

Suite, Apt. #, etc.

Suite 4

City & State

Wellington Florida

Zip

33414

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/2001

5. FEI Number

65-1149626

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

Aaron J. Goldasich

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

3141 Fortune Way

Suite, Apt. #, Etc.

Suite 4

City

wellington

State

FL

Zip Code

33414

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

[Signature]

Date

10-14-03

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	Aaron J. Goldasich	3141 Fortune Way Suite 4	Wellington Florida
VP	John J. Goldasich	3141 Fortune Way Suite 4	Wellington Florida

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]

Aaron J. Goldasich

Date

10-14-03

Daytime Phone #

501 754-0562

CR2E081 (10/02)

10/20

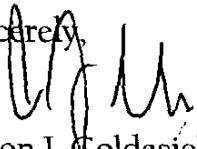


October 14, 2003

To whom It may Concern:

Please accept this URB report after notification via a telephone conversation today that their, was a correspondence that we never received for you office dated May 27, 2003. Please waive the reinstatement fee. Thank you for your cooperation on this important matter. Should you require additional information please call me.

Sincerely,


Aaron J. Goldasich
President

CORPORATE HEADQUARTERS

3141 FORTUNE WAY, SUITE 4 • WELLINGTON, FLORIDA 33414
PHONE 561-784-2600 • FAX 561-784-2777
AQUATECGROUP@MSN.COM