PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION ! **FOR** REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

P02000052094 DOCUMENT #

1. Corporation Name

VORIS AND GOLDASICH ENVIRONMENTAL CONSULTING, IN

Principal Place of Business

Mailing Address

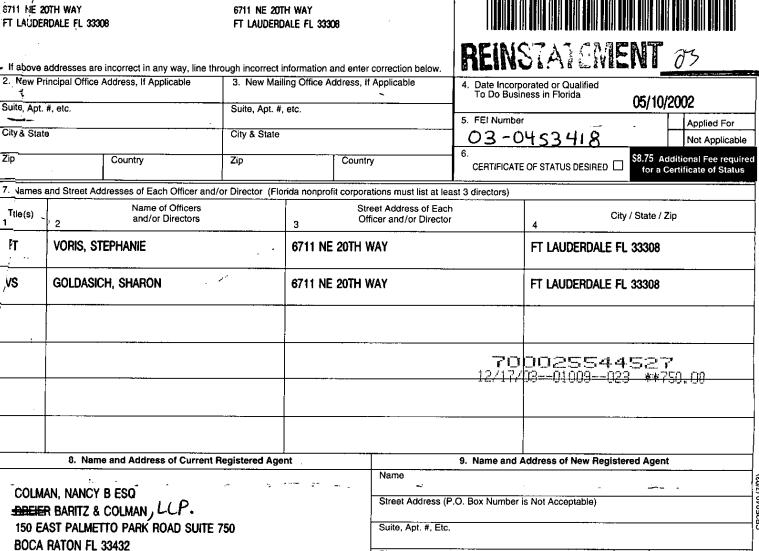
8711 NE 20TH WAY

6711 NE 20TH WAY

FII ED

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SECRETARY OF STATE TALLAHASSEE FLORIDA



REGISTERED AGENT MUST SIGN 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

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.

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 of Registered Age

Wildasich Sharon Goldasich 12.4.07 541.88395

RINTER NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Dayline Phone #

Date 12.9.03

State

Zip Code