


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P02000114837			
1. Corporation Name Waste Reduction Technology, Inc.			
2. Principal Office Address 74 Island Estates Parkway Suite, Apt. #, etc.		3. Mailing Office Address Suite, Apt. #, etc.	
City & State Palm Coast, Florida		City & State	
Zip 32137	Country USA	Zip	Country

FILED

04 MAY 26 PM 9:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

500037060385
05/25/04--01004--001 **900.00

4. Date Incorporated or Qualified To Do Business in Florida 10/24/02	
5. FEI Number 14-1861320	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent	
Name William C. Britton	
Street Address (P.O. Box Number is Not Acceptable) 32 Old Oak Drive South	
Suite, Apt. #, Etc.	
City Palm Coast	State FL
Zip 32137	Zip Code 32137

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

William C. Britton

Date 5-17-04

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/D Preside	Herb Ligon	74 Island Estates Parkway	Palm Coast, FL 32137
Vice Pr	William C. Britton	32 Old Oak Drive South	Palm Coast, FL 32137

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:

William C. Britton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-17-04

Date

386-446-642

Daytime Phone #

CR2E081 (01/04)