


2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000055185		
1. Entity Name A.R.S. EARTHWORKS, INC.		

Principal Place of Business 30326 FAIRWAY DRIVE WESLEY CHAPEL, FL 33543	Mailing Address P.O. BOX 7827 WESLEY CHAPEL, FL 33544
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

FILED
04 OCT 21 AM 10:28



10122004 REIN-P CR2E098 (6/04)

4. FEI Number 77-0599496	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SMITH, MARTIN E 30326 FAIRWAY DRIVE WESLEY CHAPEL, FL 33543
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7. Name and Address of New Registered Agent	
Name Michelle M. Smith	
Street Address (P.O. Box Number is Not Acceptable) 30326 Fairway Drive	
City Wesley Chapel	FL Zip Code 33543

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 registered agent.

SIGNATURE <i>Michelle M. Smith</i>	DATE 10/16/2004
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FILE NOW!!! FEE IS \$150.00 After January 1, 2005, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Michelle M. Smith</i>	DATE: 10/16/2004	DAYTIME PHONE: 8133761683
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