

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 AUG 24 AM 7:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000029706

1. Corporation Name

Industrial Chemicals & Consultants
Inc.

REINSTATEMENT 05-07

2. Principal Office Address - No P.O. Box #

244 So. Oak Creek Ln. 244 So. Oak Creek Ln.

Suite, Apt. #, etc.

3. Mailing Office Address

244 So. Oak Creek Ln.

Suite, Apt. #, etc.

CR2E081 (1/07)

City & State

Romeoville, IL

Zip

60446

Country

USA

City & State

Romeoville

Zip

IL

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

2/13/2004

5. FEI Number

20-0829687

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

James Whitehead

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

537 Berkshire Ct.

Suite, Apt. #, Etc.

City

Orange Park, FL

State

FL

Zip Code

32073

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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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

James Whitehead

REGISTERED AGENT MUST SIGN

Date Aug 3, 2007

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
President	Richard Whitehead	244 So. Oak Creek Ln.	Romeoville, IL 60446
President	James Whitehead	537 Berkshire Ct.	Orange Park, FL 32073
SEC	Sharon Whitehead	244 So. Oak Creek Ln.	Romeoville, IL 60446

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 contained in Chapter 119, 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:

Richard Whitehead

Date

8-3-2007

Daytime Phone #

708
250-1142

209/5