2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000172681

Entity Name: ACCURATE LEAK DETECTION INC.

WINTER PARK, FL 32793

City-St-Zip:

FILED Oct 09, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: P.O. BOX 4995 WINTER PARK, FL 32793 **Current Mailing Address: New Mailing Address:** P.O. BOX 4995 WINTER PARK, FL 32793 FEI Number: 59-3428256 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WESTON, NATHAN C 1219 SWAN STREET WINTER SPRINGS, FL 32708 US 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. SIGNATURE: NATHAN WESTON Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DIR () Delete () Change () Addition WESTON, NATHAN Name: Name: P.O. BOX 4995 Address: Address: City-St-Zip: WINTER PARK, FL 32793 City-St-Zip: Title: Title: () Change () Addition () Delete Name: WESTON, NATHAN Name: P.O. BOX 4995 Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NATHAN WESTON MR 10/09/2006