

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FOR REINSTATEMENT

FILED

02 OCT 29 PM 4:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P31682

1. Corporation Name

PRELOAD, INC.

Principal Place of Business

60 COMMERCE DRIVE
HAUPPAUGE NY 11788
US

Mailing Address

60 COMMERCE DRIVE
HAUPPAUGE NY 11788
US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

10/18/1990

5. FEI Number

11-2325621

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	TRIPP, ANDREW E., JR.	60 COMMERCE DRIVE	HAUPPAUGE NY 11788
V	BUSH, MICHAEL	60 COMMERCE DRIVE	HAUPPAUGE NY 11788
V	SHERROD, WAITES	60 COMMERCE DRIVE	HAUPPAUGE NY 11788
V	LEGATOS, NICHOLAS	60 COMMERCE DRIVE	HAUPPAUGE NY 11788
VD	HORNSTEIN, JACK	60 COMMERCE DRIVE	HAUPPAUGE NY 11788
ST	MARRONE, JOANNE C	60 COMMERCE DRIVE	HAUPPAUGE NY 11788

8. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

200008666892
10/29/02--01072--006 **150.00

City

State
FL

Zip Code

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.

Signature of Registered Agent

Signature
SIGNATURE REQUIRED
Patrick A. Nolan
Assistant Secretary

REGISTERED AGENT MUST SIGN

Date

10/25/02

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 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:

Signature
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Joanne C. Marrone, Secretary/Treasurer

10/22/02

631-231-8100

Date

Daytime Phone #

CR2E040 (8/02)



Preload Inc. • 60 Commerce Drive
Hauppauge, New York 11788

Prestressed Concrete Tanks

631-231-8100 • Fax 631-231-8881
<http://www.preload.com>
e-mail: sales@preload.com

October 22, 2002

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

Re: Preload Inc.
Document No.: P31682

To Whom It May Concern:

Please be advised that Preload Inc. has not received any previous Uniform Business Reports. The first notice we received in regards to our renewal is the one stating that our report has not been filed with an application for reinstatement.

I respectfully request the reinstatement fee be waived due to non-receipt of the previous reports. I have enclosed a completed reinstatement application along with the regular filing fee of \$150.00.

If you have any questions regarding this or should require any additional information, please feel free to contact me.

Thank you for your assistance in this matter.

Very truly yours,

Joanne C. Marrone, C.P.A.
Chief Financial Officer
Secretary/Treasurer

JCM/rb

Enclosures