

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000067418

1. Corporation Name

PENNSYLVANIA EARTH TECHNOLOGIES, INC.

Principal Place of Business

Mailing Address

~~48699 AVENUE CAPRI~~
~~LUTZ FL 33549-5346~~

PO BOX 857
MCMURRAY PA 15317

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

2. New Principal Office Address, if Applicable

3. New Mailing Office Address, if Applicable

2620 HUNT ROAD
Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
LAND O' LAKES FL

City & State

Zip Country
34639 USA

Zip Country

4. Date Incorporated or Qualified
To Do Business in Florida

09/28/1993

5. FEI Number

65-0439970

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P	BROADRICK, RON L	18639 AVE CAPRI	LUTZ FL 33549
V	GODDARD, CLEON GODARD	105 TANGLEWOOD DR	MCMURRAY PA 15317
ST	BROADRICK, LEWIS	18225 BITTERN AVE	LUTZ FL
REINSTATEMENT 98			
600002706626-9 -12/08/98-01083-002 ****758.75 ****758.75			
5C 12898			

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BROADRICK, RON
18639 AVENUE CAPRI
LUTZ FL 33549-5346

Name

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

Suite, Apt. #, Etc.

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.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 11-30-98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. 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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(724) 942-3006

CR2040 (9/98)