PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 JUN 10 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

300005820383--4
-06/18/02--01072--006
****450.00 ****450.00
~~300005820383--4~~
~~-06/18/02--01072--006~~
~~****450.00 ****450.00~~
450.0042

DOCUMENT #

1. Corporation Name: High-Tech Pool Services Inc.
P97000007288

2. Principal Office Address	3. Mailing Office Address
1779 N. Congress	1779 N. Congress Ave
Suite, Apt. #, etc.: Suite 341	Suite, Apt. #, etc.: Suite 341
City & State: Boynton Bch	City & State: Boynton Bch
Zip: 33462 Country: USA	Zip: 33462 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 6/2/98

5. FEI Number: 650771226 ☐ 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: Thomas Cucinotta

Street Address (P.O. Box Number is Not Acceptable): 7520 Duncrest Rd

Suite, Apt. #, Etc.:

City: Lake Worth FL | State: FL | Zip Code: 33467

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: Thomas Cucinotta Date: 6/5/02
REGISTERED AGENT MUST SIGN

CR2E081 (9/01)

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
PRES	Thomas Cucinotta	7520 Duncrest Rd	Lake Worth FL 33467
V.PRES.	Patricia Cucinotta	7520 Duncrest Rd	Lake Worth FL 33467
			351.25 - AR
			10.00 - ARARTS
			88.75 - ARSupp

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 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: Thomas Cucinotta 6/5/02 561-719-1872
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

High -Tech Pool Sevices

June 3, 2002

Dear Sirs

This letter is to inform you that High-Tech Pool Services was inadvertently dissolved due to an address change. The proper yearly forms were never forwarded to our current Address. Since the year 1999 Our corporation has been dissolved unbeknownst to us.In speaking to representatives on the phone several times we were informed to mail you a reinstatement form along with this letter. We are also sending a check for 450.00. We were told that would be what was needed, 150.00 each year that wasn't filed. On behalf of us and our corporation we are a very diligent business. We are accurate and timely with all of our scheduled payment requirements. It is unfortunate that this happened and we hope to rectify this matter soon.

Please respond by phone or mail upon receipt 561-357-7836

Sincerely,

Patricia Cucinotta

Patricia Cucinotta

Thomas Cucinotta

Thomas Cucinotta