2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Jun 27, 2005
Secretary of State

DOCUMENT# P98000043369

Entity Name: ABSOLUTE WATER CARE, INC.

Current Principal Place of Business:

22 SOUTH VENICE BLVD
VENICE, FL 34293 US

New Principal Place of Business:

22 SOUTH VENICE BLVD.
VENICE, FL 34293 US

Current Mailing Address:

22 SOUTH VENICE BLVD
VENICE, FL 34293 US

New Mailing Address:

909 SILVER LAKE BLVD.
DOVER, DE 19904 US

FEI Number: 65-0835686 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: CORPORATION SERVICE COMPANY
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:

Title: AST ( ) Delete
Name: COOPER, BETH
Address: 909 SILVER LAKE BLVD
City-St-Zip: DOVER, DE 19904

Title: P (X) Delete
Name: GIBSON, KENNETH
Address: 22 SOUTH VENICE BLVD
City-St-Zip: VENICE, FL 34293

Title: CEO ( ) Delete
Name: SCHIMKAITIS, JOHN R
Address: 909 SILVER LAKE BLVD
City-St-Zip: DOVER, DE 19904

Title: VTCE ( ) Delete
Name: MCMASTERS, MICHAEL P
Address: 909 SILVER LAKE BLVD
City-St-Zip: DOVER, DE 19904

Title: VPT ( ) Delete
Name: MCMASNERS, MIKE
Address: 909 SILVER LAKE BLVD
City-St-Zip: DOVER, DE 19904

Title: CFO ( ) Delete
Name: MCMASNERS, MIKE
Address: 909 SILVER LAKE BLVD
City-St-Zip: DOVER, DE 19904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPT (X) Change ( ) Addition
Name: MCMASTERS, MIKE
Address: 909 SILVER LAKE BLVD
City-St-Zip: DOVER, DE 19904

Title: CFO (X) Change ( ) Addition
Name: MCMASTERS, MIKE
Address: 909 SILVER LAKE BLVD
City-St-Zip: DOVER, DE 19904

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL P. MCMASTERS CFO 06/27/2005
Electronic Signature of Signing Officer or Director Date