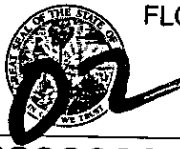


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 JAN 14 AM 10:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P99000083208

1. Corporation Name

WATER PURE CORPORATION

Principal Place of Business

Mailing Address

1160 102ND STREET  
BAY HARBOR ISLAND FL 33154

1160 102ND STREET  
BAY HARBOR ISLAND FL 33154



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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

09/15/1999

5. FEI Number

65-0948809

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<br>Title(s) | 2<br>Name of Officers<br>and/or Directors | 3<br>Street Address of Each<br>Officer and/or Director | 4<br>City / State / Zip    |
|---------------|---|--|----------------------------|
| PSD           | RAMOS, FRANK                              | 1160 102ND STREET                                      | BAY HARBOR ISLAND FL 33154 |
|               |   |  |                            |
|               |   |  |                            |
|               |   |  |                            |
|               |   |  |                            |
|               |   |  |                            |
|               |   |  |                            |
|               |   |  |                            |

900010077329  
01/14/03--01056--007 \*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HOLLIDAY, GRIER  
1160 102ND STREET  
BAY HARBOR ISLANDS FL 33154

Name

Frank Ramos

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

1160 102nd Street

Suite, Apt. #, Etc.

Bay Harbor Island, FL

City

State

Zip Code

FL

33154

CR2E040 (8/02)

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 REQUIRED

REGISTERED AGENT MUST SIGN

Date: 1/9/3

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/3 (205)  
940-8875



WaterPure™ Corporation  
1160 - 102 Street, Suite 1  
Miami, FL 33154  
Tel: (305) 940-8875  
(877) 940-8875  
Fax: (305) 865-7150  
[www.diplus.com](http://www.diplus.com)  
[info@diplus.com](mailto:info@diplus.com)

January 9, 2203

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

Sir or Madam:

We did not receive notice on a timely manner, please find enclosed our filling and original fee.

Regards,

A handwritten signature in black ink, appearing to read "Frank Ramos", written over a circular stamp or seal.

Frank Ramos