

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 NOV 19 AM 10:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000097092

1. Corporation Name

United Water Operations Florida Inc.

REINSTATEMENT 04

2. Principal Office Address

200 Old Hook Road

Suite, Apt. #, etc.

City & State

Harrington Park, NJ

Zip

07640

Country

USA

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

4. Date Incorporated or Qualified

To Do Business in Florida 11/4/1999

5. FEI Number

22-3718387

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

800042907578
11/19/04--01070--004 **758.75

7. Name and Address of Current Registered Agent

Name

The Prentice Hall Corporation System Inc.

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

1201 Hayes Street

Suite, Apt. #, Etc.

105

City

Tallahassee

State

FL

Zip Code

32301

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

REGISTERED AGENT MUST SIGN

Date

11-16-04

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 |
|--------|--------------------------------------|---|---------------------|
| P | Robert J. Iacullo | 200 Old Hook Rd. | Harrington Park, NJ |
| D/S | Robert A. Gerber | 200 Old Hook Rd. | Harrington Park, NJ |
| T | Edward J. Imparato | 200 Old Hook Rd. | Harrington Park, NJ |
| AS | Carla E. Hjelm | 200 Old Hook Rd. | Harrington Park, NJ |
| | | | |
| | | | |

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11-8-04

Daytime Phone #

CR2E081 (01/04)