

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 MAY 18 PM 3:43

DOCUMENT #

P99000002014

1. Corporation Name

Aqua-Size Inc

2. Principal Office Address

3268-53rd Terrace N

Suite, Apt. #, etc.

City & State

St. Petersburg FL

Zip

33714

Country

Pinellas

3. Mailing Office Address

same

Suite, Apt. #, etc.

City & State

"

"

Zip

"

Country

"

4. Date Incorporated or Qualified
To Do Business in Florida

11/09/99

5. FEI Number

59-3638036

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

James A. Sizemore III

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

3268-53rd Terrace N

Suite, Apt. #, Etc.

900004421399-0

-06/14/01--01129-010

****308.75 ****308.75

City

St. Petersburg

State

FL

Zip Code

33714

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

James A. Sizemore III
REGISTERED AGENT MUST SIGN

Date 5/14/01

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 CEO | James A. Sizemore III | 3268-53 rd Terrace N | St. Petersburg FL 33714 |
| V.P. | Steve S. Beinhorn | 2617 Cove Cay Dr #610 | Clearwater FL 33760 |
| Sec | Sheryl Touchton | 10965 Temple Ave | Seminole FL 33722 |
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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:

James A. Sizemore III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James A. Sizemore III

Date

5/14/01

Daytime Phone #

727-522-1704

CR2E081 (9/00)