

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

00 MAR 13 PM 12:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 802778

1. Corporation Name
Cell Recycle, Incorporated

2. Principal Office Address
1280 W. Blue Spgs Ave.

Suite, Apt. #, etc.

City & State
Orange City, Fla

Zip Country
32763 USA

3. Mailing Office Address
1280 W. Blue Spgs Ave.

Suite, Apt. #, etc.

City & State
Orange City, Fla

Zip Country
32763 USA

4. Date Incorporated or Qualified
To Do Business in Florida 10-17-1990

5. FEI Number 59-3033678
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
Deborah L. Kufner

Street Address (P.O. Box Number is Not Acceptable)
1280 W. Blue Spgs. Ave.

Suite, Apt. #, Etc.

100003178341-7
-03/22/00--01001--001
****300.00 ****300.00

City
Orange City

State Zip Code
FL 32763

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 Deborah L. Kufner
REGISTERED AGENT MUST SIGN

Date 03-09-00

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
VP/TR.	Deborah L. Kufner	1280 W. Blue Spgs. Ave. Orange City, Fla. 32763	Orange City, Fla. 32763
P/Sec	Cheryl A. Class	1335 Kettledrum Dr.	Enterprise, Fla 32725

99-00A31TS

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: Deborah L. Kufner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-09-00 904-775-7979
Date Daytime Phone #

Cell Recycle, Inc.

Thursday, March 9, 2000

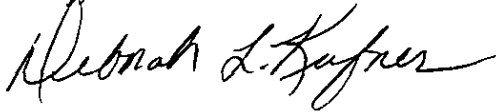
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fla. 32314

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To Whom it may concern,

On January 27, 2000, I spoke with Stacey Sprather to notify your department that I had not received an annual corporate report notice. Upon looking into your system, she discovered that the reports had been returned by the postal system due to the damage that had occurred in the postal sorters. She has forwarded a corporate reinstatement form and instructed me to remit \$300.00 for the reinstatement fee for Cell Recycle, Inc. Your timely action in this matter will be greatly appreciated. Thanking you in advance.

Sincerely,



Deborah L. Kufner
V.P./Treasurer