

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 PM 2:33

STATE DEPT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000009378

1. Corporation Name

WINDOWS AND BLESSINGS DRY CLEANERS, INC.

Principal Place of Business

10658 WIMBLEDON DR
JACKSONVILLE FL 32257

Mailing Address

10658 WIMBLEDON DR
JACKSONVILLE FL 32257

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.
327 EAST BAY STREET
City & State
JACKSONVILLE, FL 32202

Zip
32202 Country
US

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.
327 EAST BAY STREET
City & State
JACKSONVILLE, FL

Zip
32202 Country
US

600010066466
01/14/03--01028--003 **308.75



2002-2003 UBR

4. Date Incorporated or Qualified
To Do Business in Florida

01/24/2001

5. FEI Number

59-3692629

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 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D/c	THOMAS, JAMES W SR	10658 WIMBLEDON DR	JACKSONVILLE FL 32257
P/T	LOLA MAE SMITH	3838 WINTON DRIVE	JACKSONVILLE, FL 32208
VP	KING S. SMITH JR.	7201 ARLINGTON EXPRESSWAY APT 88	JACKSONVILLE, FL 32211
S	FRANCINE B. SMITH	7201 ARLINGTON EXPRESSWAY APT 88	JACKSONVILLE, FL 32211
M	RODNETTA STAMPER	3838 WINTON DRIVE	JACKSONVILLE, FL, 32208
M	SHARETTA STAMPER	3838 WINTON DRIVE	JACKSONVILLE, FL, 32208

8. Name and Address of Current Registered Agent

CAMP, RICHARD
4110 SOUTHPOINT BLVD #205
JACKSONVILLE FL 32216

9. Name and Address of New Registered Agent

Name
JAMES W. THOMAS
Street Address (P.O. Box Number is Not Acceptable)
3838 WINTON DRIVE
Suite, Apt. #, Etc.
City
JACKSONVILLE
State
FL
Zip Code
32208

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
James W. Thomas SR
REGISTERED AGENT MUST SIGN

Date 1-8-03

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
James W. Thomas SR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
1-8-03 904-535-4091
Date Daytime Phone #

CR2E040 (8/02)

1-8-03

2 of 2

TO WHOM IT MAY CONCERN:

ON MONDAY, 1-6-03 AT 11:00AM, I NOTIFIED
THE DEPARTMENT OF STATE / DIVISION OF CORPORATIONS.

I EXPLAINED TO THE REPRESENTATIVE THAT I
HAD NOT RECEIVED ANY PRIOR NOTICES OF THE
UNIFORM BUSINESS REPORTS; SHE ADVISED ME TO
WRITE THIS LETTER EXPLAINING THE MENTIONED
INFORMATION.

I AM REQUESTING THAT THE LATE FEE BE
WAIVED; DUE TO ME NOT RECEIVING THE "U.B.R."

THE REPRESENTATIVE ALSO ADVISED ME TO
SEND \$150.00 FOR 2002 AND \$150.00 FOR 2003,
SO, I HAVE ENCLOSED THE AMOUNT OF
\$308.75. I INCLUDED \$8.75 FOR A
CERTIFICATE OF STATUS.

RESPECTFULLY SUBMITTED,
DIRECTOR/CEO James W. Thomas
PHONE # 904 - 535-4091
BUSINESS # 904 - 475-9076