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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

FILED

04 OCT 12 AM 9:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F02000005800

1. Corporation Name
One Step cleaning corporation

2. Principal Office Address <i>12540 Vista Isles Dr.</i> Suite, Apt. #, etc. <i># 1126</i> City & State <i>Sunrise Florida</i> Zip <i>33325</i>		3. Mailing Office Address <i>12540 Vista Isles Dr.</i> Suite, Apt. #, etc. <i># 1126</i> City & State <i>Sunrise Florida</i> Zip <i>33325</i>	
Country	<i>Broward</i>	Country	<i>Broward</i>

MM 10/12/04
REINSTATEMENT 03-04

4. Date Incorporated or Qualified To Do Business in Florida <i>11-01-2002</i>	5. FEI Number <i>-0304-19113</i>	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>		

\$3.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent Name <i>Kevin Dowell</i> Street Address (P.O. Box Number is Not Acceptable) <i>12540 Vista Isles Dr.</i> Suite, Apt. #, Etc. <i># 1126</i> City <i>Sunrise</i>		State FL	Zip Code <i>33325</i>
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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 *Kevin Dowell* Date *9-29-04*

REGISTERED AGENT MUST SIGN

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
<i>R. Pres.</i>	<i>Kevin Dowell</i>	<i>12540 Vista Isles Dr.</i>	<i>Sunrise, FL 33325</i>
<i>Vice Pres.</i>	<i>Jeremiah Carter</i>	<i>1243 NW 121st Ave.</i>	<i>Plantation, FL 33323</i>

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10/12/04--01004--003 **308.75

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: *Kevin Dowell* Date *9-29-04* (954) 732-7656

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (01/04)

2022

One - Step Cleaning Corp.

12540 Vistas # 1126 Sunrise, FL 33325 tel: 614-657-2871 fax: 954-452-1161

October 1, 2004

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

Document # F02000005800

Division of Corporations,

I am the President/CEO of One-Step Cleaning Corporation. I am also the Registered agent for One-Step Cleaning Corp. We were instructed by an examiner at your office to include a letter along with our payment in order to have our corporation reinstated. Our address has changed since early 2003, therefore we did not receive our Annual Report Form. The examiner instructed us to include \$308.75 to cover our reinstatement fee and the Certificate of Status.

We are unable to cash our checks at the bank until we receive our *Certificate of Status*; can you please send the form **as soon as possible**. Thank you very much for your assistance and please feel free to contact us with any questions or concerns.

Sincerely,



Kevin Dowell/CEO