

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # F08163

1. Corporation Name

M & M CLEANERS, INC.

Principal Place of Business

Mailing Address

1201 20TH STREET  
C/O MORRIS FRIEDMAN  
MIAMI BEACH FL 33139

1201 20TH STREET  
C/O MORRIS FRIEDMAN  
MIAMI BEACH FL 33139

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

2. New Principal Office Address, If Applicable

1201 20th Street

Suite, Apt. #, etc.

C/O MARK FRIEDMAN

City & State

MIAMI BEACH, FL

Zip

33139

Country

USA

3. New Mailing Office Address, If Applicable

1201 20th St

Suite, Apt. #, etc.

C/O MARK FRIEDMAN

City & State

MIAMI BEACH FL

Zip

33139

Country

USA

REINSTATEMENT

4. Date Incorporated or Qualified To Do Business in Florida

12/08/1980

5. FEI Number

59-2047662

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
DP	FRIEDMAN, MARK	1201 20TH STREET 1800 NE 114th #510	MIAMI BEACH, FL N. MIAMI, FL 33181
DS	FRIEDMAN, MICHAEL	22 POWDERHORN WAY 22 POWDERHORN WAY	TARRYTOWN NY 10591
<del>DP</del>	<del>GUZZO, ANN</del>	<del>29 EASTWIND ROAD</del>	<del>YONKERS NY</del>

500002724335-6  
-12/29/98-01016-022  
\*\*\*\*758.75 \*\*\*\*758.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

FRIEDMAN, MARK H.  
1201 20TH STREET  
MIAMI BEACH FL 33139-8407

Name

MARK H FRIEDMAN

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

1800 NE 114th St, N. MIAMI, FL

Suite, Apt. #, Etc.

APT 510

City

N MIAMI

State

FL

Zip Code

33181

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.

Signature of Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

12/9/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information on Intangible tax)

12. 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

MARK H. FRIEDMAN

Date

12/9/98 (305) 538-4543

Daytime Phone #

CR2540 (9/98)