

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1

APPLICATION

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FOR REINSTATEMENT



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 OCT 24 AM 10:40

DOCUMENT # F99000006563

1. Corporation Name

CELTIC CLEANING SYSTEMS, INC.

Principal Place of Business

Mailing Address

2-12 WEST PARK AVENUE
LONG BEACH NY 11561

2-12 WEST PARK AVENUE
LONG BEACH NY 11561



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

12/21/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

11-3421266

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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
CP	O'CONNOR, PATRICIA TATE	2118 TREVOR ROAD	PALM HARBOR FL 34684
✓	O'CONNOR, RICHARD	2118 TREVOR ROAD	PALM HARBOR FL 34684

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

O'CONNOR, PAT
2118 TREVOR ROAD
PALM HARBOR FL 34684

Name

PATRICIA O'Connor

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

2451 McMullen Booth Rd

Suite, Apt. #, Etc.

202

City

Clearwater

State

FL

Zip Code

33759

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

Patricia O'Connor

Date

10/20/00

REGISTERED AGENT MUST SIGN

CR2E040 (8/00)

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:

Patricia O'Connor
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/20/00
Date

727 7128366
Daytime Phone #



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Celtic Systems Inc. • 2451 McMullen Booth Road • Clearwater, Florida 33759
Tel: 727 712 8366 • Fax: 727 712 8926 • www.grimereaper.net

October 20, 2000

Department of State
Division Of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Document # F9900006563

To Whom It May Concern:

I have just received the notice of dissolution or revocation . This is the first notice I have received from your office with regard to filing the 2000 corporate annual report/uniform business report. I have completed the application for reinstatement along with a check for \$150.00. I presume that because of our move to our new offices, that is why we did not receive any prior notification. Thank you in advance for your help in this matter.

If you could please forward the documentation that needs to be completed by the corporation, I will ensure that this is completed immediately.

Sincerely,

Patricia O'Connor
President