

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Horne
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J08548

1. Corporation Name

ACME DRIVE IN CLEANERS, INC.

Principal Place of Business

% RALPH DEBONIS, JR.
254 MASON AVE.
HOLLY HILL FL 32117-5039

Mailing Address

% RALPH DEBONIS, JR.
254 MASON AVE.
HOLLY HILL FL 32117-5039

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.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/10/1986

5. FEI Number

59-2656922

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Numbers)	City / State / Zip 4
PD	DEBONIS, RALPH	128 MALLARD LN	DAYTONA BEACH FL
D	DEBONIS, LUCY M.	128 MALLARD LN	DAYTONA BEACH FL
VPD	DEBONIS, RALPH III	2121 BRIAN AVE	SO DAYTONA FL

700002796677-2
-03/05/99-01117-009
****300.00 ****

3/2/99

8. Name and Address of Current Registered Agent

DEBONIS, RALPH, JR.
254 MASON AVE.
HOLLY HILL FL

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Ralph De Bonis Jr.
REGISTERED AGENT MUST SIGN

Date

2/8/99

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:

Ralph De Bonis Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/99

(904) 253-9710
Daytime Phone #

CR2E040 (9/98)

Susan B. Glass
CERTIFIED PUBLIC ACCOUNTANT

②

(904) 253-0706
(904) 253-9583 FAX

346 S. PALMETTO AVENUE
DAYTONA BEACH, FL 32114-4920

Division of Corporations
Annual Reports Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

February 8, 1999

Dear Sirs,

Enclosed please find check #7827 for \$300. This check is for the 1998 annual report, which is being filed late. Please consider reinstating this Corporation because the Officers were not aware that their bookkeeper had not paid the fee timely. They had instructed that it be paid by April 1, 1998.

After the bookkeeper was dismissed, they received the letter of dissolution. They thought the notice was in error, but later found the original and 2nd request of the annual report.

Thank you in advance for your consideration regarding this matter. If I can be of further assistance, please do not hesitate to contact me.

Sincerely,

Susan B. Glass

Susan B. Glass, C.P.A.