

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

AND
FILED

1997 NOV -4 AM 9:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K80472

1. Corporation Name

QUALITY POWER SWEEPING, INC.

Principal Place of Business

6572 NW 13 COURT
PLANTATION FL 33313

Mailing Address

6572 NW 13 COURT
PLANTATION FL 33313



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

04/14/1989

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0120167

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
DVP	SPOONER, KAREN L.	6572 NW 13 COURT	PLANTATION FL
DP	ALMANY, DOUGLAS CRAIG	6572 NW 13 COURT	PLANTATION FL 33313
DVP	Sauerwein, Jeri, Co-owner	6572 NW 13 Ct	Plantation FL 33313
			900002340789 -11/06/97--0111-1877 ****165.00 ****165.00

8. Name and Address of Current Registered Agent

ALMANY, DOUGLAS C
6572 N.W. 13 COURT
PLANTATION FL 33313

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

Douglas Craig Almamy
REGISTERED AGENT MUST SIGN

Date

10/27/97

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

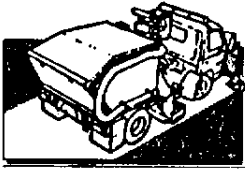
Jeri C. Sauerwein DVP

Date

Daytime Phone #

10-27-97/454
587-5212

CR2E040 (8/97)



QUALITY POWER SWEEPING, INC.

2269 S. University Drive • Suite 200 • Davie, Florida 33324

(305) 587-5212

October 28, 1997

DIVISION OF CORPORATIONS
ANNUAL REPORT/REINSTATEMENT SECTION
P.O. BOX 6327
TALLAHASSEE FL 32314-6327

To Whom it May Concern:

I called spoke with a gentleman today. We never received any paperwork or renewal.
He said to mail \$ 165.00 with a letter explaining , we never received the paper work.
Thanks for your help.

Sincerely,

Jeri Sauerwein

J.C.S.