

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS

03 MAR 21 PM 4:00

DOCUMENT # P0000008218

1. Corporation Name

Viza Cleaning, Inc

2. Principal Office Address

3424 W. Laurel

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 152973

Suite, Apt. #, etc.

City & State

Tamda, FL 33607

City & State

Tamda, FL

Zip

33607

Country

USA

Zip

33684

Country

UOA

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

59-3633516

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

YLIANA ZAMORA

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

3125 W. Hillsborough Ave

Suite, Apt. #, Etc.

City

Tamda

State

FL

Zip Code

33614

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

3/13/03

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
PHVP	YLIANA ZAMORA	2519 W. Fern St	Tamda, FL 33614

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/13/03

Daytime Phone #

(813) 882-4451

CR2E081 (10/02)

March 13, 2003

VIZA CLEANING, INC
3424 W. Laurel Street
Tampa, Florida 33607
813-927-7214

Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Dear Department of Corporations,

I spoke to one of your customer representatives yesterday, regarding my status with your office. I explained to them that we are opening a new bank account at a new bank, and gave them all needed documents, but my corporation status showed inactive.

Not to sound nieve or stupid, but I thought informing the Department of Treasury was my only duty, We were not aware that there was a corporation entity that needed to be notified of a change of address or that there was a annual fee involved. My accountant did the original transaction for us and we just assumed that once a corporation always a corporation.

I am requesting that all penalties and late fees be waived this one time for failure of mis-information. I have enclosed a check for the amount of \$460.00 to be reinstated.

I was also told that this would take a matter of 7-10 working days to take effect. I hope to receive a confirmation from your office as soon as I am active again.

Thank you for your prompt attention to this matter.

Cordially,



Yliana Zamora