PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



· EE/GE KE/B / KEE ING / KGG / GKE		
CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 07 APR -3 PM 2:14 SECRETARY OF STATE
DOCUMENT # ₽ 000 000 46 7-36 1. Corporation Name		TALLAHASSEE, FLORIDA
VIZA DRY CLEANERS, INC.		
3849 W. Hillsborn Blod	3. Mailing Office Address 3849 W. Hillsbono Blul. Suite, Apt. #, etc.	4. Date incorporated or Qualified To Do Business in Florida
Deerfield Beach Fl.	Deafield Beach . F/.	5. FEI Number Applied For Not Applicable
33442 Country V.S.A.	Zip 33442 Country U.S.A.	6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required to a Certificate of Status
Name Richard NA9Y Street Address (P.O. Box Number is Not Acceptable) 5589 NW 44th WAY Suite, Apt. #, Etc. City COCONNT CARL State Zip Code FL 33073		The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.
So 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		
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
President Richard Nag	4 \$589 NW 44th h	lay Coconut creex, F/.
		450098242024 04/09/0701045003 **1050.00
		04/09/0701045003 **1050.00
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 contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

, , ₂

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Fl. 32301

Viza Dry Cleaners, Inc 3849 W. Hillsboro Blvd. Deerfield Beach, Fl. 33442

March 28, 2007

To whom it may concern;

After speaking to a woman on the phone at your office, I was told to reinstate Viza Dry Cleaners, Inc. I would have to send in a payment of \$1,050.00. I am submitting check no. 2296 for \$1,050.00 to have Viza Dry Cleaners, Inc. reinstated. I have not received any prior notification regarding the closing of this corporation.

Thank you.

Sincerely,

Richard Nagy - President Viza Dry Cleaners, Inc.