

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 JUN 25 AM 8:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000058974

1. Corporation Name

J.A.T. Cleaning, INC

2. Principal Office Address

3251 SW 56th Ave

Suite, Apt. #, etc.

City & State

Pembroke Park, FL

Zip

33023

Country

Broward

3. Mailing Office Address

2701 N. Hiatus Rd

Suite, Apt. #, etc.

155

City & State

Cooper City, FL

Zip

33026

Country

Broward

4. Date Incorporated or Qualified
To Do Business in Florida

6/16/2000

5. FEI Number

☐ 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

Anthony Lee Brown

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

3251 SW 56th Ave

Suite, Apt. #, Etc.

City

Pembroke Park

State

FL

Zip Code

33023

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

Anthony L. Brown

Date

6/21/2002

REGISTERED AGENT MUST SIGN

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
<u>President</u>	<u>Anthony L. Brown</u>	<u>3251 S.W. 56 Ave</u> <u>Pembroke Park, FL 33023</u>	<u>Pembroke Park FL 33023</u>
<u>Manager</u>	<u>Terry McClary</u>	<u>4170 N.W. 21st Ave</u> ^{APT 3102}	<u>Oakland Park, FL 33317</u>
<u>Vice President</u>	<u>Matthew Bora</u>	<u>3251 S.W. 56 Ave</u>	<u>Pembroke Park FL 33023</u>

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:

Anthony L. Brown

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6/21/2002-954-261-7179

Daytime Phone #

CR2E081 (9/01)