

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000064847

FILED  
Apr 14, 2005  
Secretary of State

Entity Name: CAROLIAN CLEANING SERVICES, INC.

**Current Principal Place of Business:**

2425 WILLOW TREE LANE  
KISSIMMEE, FL 34758

**New Principal Place of Business:**

**Current Mailing Address:**

2425 WILLOW TREE LANE  
KISSIMMEE, FL 34758

**New Mailing Address:**

FEI Number: 59-3666899

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MOJICA, CARLOS  
2425 WILLOW TREE LANE  
KISSIMMEE, FL 34758 US

**Name and Address of New Registered Agent:**

MOJICA, CARLOS E  
2425 WILLOW TREE LANE  
KISSIMMEE, FL 34758 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CARLOS E. MOJICA

04/14/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MOJICA, CARLOS E  
Address: 2425 WILLOW TREE LANE  
City-St-Zip: KISSIMMEE, FL 34758

Title: D ( ) Delete  
Name: MOJICA, EVELYN  
Address: 2425 WILLOW TREE LANE  
City-St-Zip: KISSIMMEE, FL 34758

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLOS E. MOJICA

P

04/14/2005

Electronic Signature of Signing Officer or Director

Date