

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 APR 15 PM 1:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000094199

1. Corporation Name

Dryclean To Go Inc.

2. Principal Office Address

342 Lakeview Dr

Suite, Apt. #, etc.

106

City & State

Weston, Florida

Zip

33326

Country

U.S.A.

3. Mailing Office Address

342 Lakeview Dr

Suite, Apt. #, etc.

106

City & State

Weston, Florida

Zip

33326

Country

U.S.A.

4. Date Incorporated or Qualified

To Do Business in Florida 10 / 2000

5. FEI Number

75-3011674

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

Matthew Herman

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

342 Lakeview Dr.

Suite, Apt. #, Etc.

#106

City

Weston

State

FL

Zip Code

33326

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

REGISTERED AGENT MUST SIGN

Date

4-8-04

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
P	Matthew Herman	342 Lakeview Dr. #106	Weston, FL 33326

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-8-04 561-261-8646

CR2E081 (01/04)

Division of Corporations
Attn; Pat Bailey
P.O. Box 6327
Tallahassee, Fl 32314

04-08-04

Matt Herman
Dryclean To Go Inc.
342 Lakeview Drive #106
Weston, Fl 33326

Mrs. Bailey,

Thank you for the help on the phone today. As per our conversation, I am submitting the downloaded corporate reinstatement form in lieu of the Uniform Business Report Form. I am enclosing a check for the UBR for the last two years (2003 and 2004) in addition, I will add the \$15.00 insufficient funds fee and the \$8.75 for the certificate of status. Please waive the corporate reinstatement fee and penalty as I did not receive notice of the 60 day notice of intent to dissolve. Thank you so much for helping me find the proper form online, have a great week.

Sincerely,


Matt Herman