

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

pg 1 of 2

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 SEP 25 PM 2:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000098714

1. Corporation Name

AMERICA'S BEST CARPET CLEANING, INC.

Principal Place of Business

1101 BRICKELL AVENUE
SUITE 1100
MIAMI, FL 33131

Mailing Address

1101 BRICKELL AVENUE
SUITE 1100
MIAMI, FL 33131

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3902 NIGHTHAWK DR.

Suite, Apt. #, etc.

City & State

WESTON, FL.

Zip

33331

Country

BROWARD

3. New Mailing Office Address, If Applicable

3902 NIGHTHAWK DR.

Suite, Apt. #, etc.

City & State

WESTON FL.

Zip

33331

Country

BROWARD

4. Date Incorporated or Qualified
To Do Business in Florida

10/19/2000

5. FEI Number

65-1048109

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	BAEZ, NATHALIE	1101 BRICKELL AVENUE SUITE 1100	MIAMI FL 33131

05-17-01 90197 001 \$8.75
05-17-01 90197 002 \$150.00

100008427231--8
-10/17/02--01057-010
****158.75 ****150.00

8. Name and Address of Current Registered Agent

PENA, J. DAVID ESQ.
1101 BRICKELL AVENUE
SUITE 1100
MIAMI FL 33131

9. Name and Address of New Registered Agent

Name
BAEZ NATHALIE
Street Address (P.O. Box Number is Not Acceptable)
3902 NIGHTHAWK DRIVE
Suite, Apt. #, Etc.
WESTON,
City
FL.
State
FL
Zip Code
33331

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

Date

REGISTERED AGENT MUST SIGN

11. 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAY-02

Date

Daytime Phone #

CR2E040 (8/01)

AMERCA'S BEST CARPET CLEANING

Phone (954) 659-0672 Fax (954) 384-9909

May 25, 2002

Florida Department of State
Katherine Harris
Secretary of State
Division of Corporations

Dear Madam:

Please Reinstatement my corporation, the delete on file the business report was due because the 2001 uniform report was sent to the lawyer's office who opened the corporation and we did not were advice to fill up and mail we just received in our address the notification of administrative dissolution.

We want to ask you if possible to void the penalty charges due to the delete

Thank you for your attention and understanding

Nathalie Baez
Director.

OK per And