

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV -3 AM 11:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P01000010489**

1. Corporation Name

AMERICA CLEANING & MAINTENANCE, INC.

Principal Place of Business

3089 NW 29TH AVE.
BOCA RATON FL 33434

Mailing Address

3089 NW 29TH AVE.
BOCA RATON FL 33434

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT 07

4. Date Incorporated or Qualified
To Do Business in Florida

01/29/2001

5. FEI Number

65-1069871

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 |
|---------------|---|--|-------------------------|
| PTD | BARCELOS SILVA, RONALDO | 3089 NW 29TH AVE. | BOCA RATON FL 33434 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

400024381054

11/03/03-01068-011 **150.00

8. Name and Address of Current Registered Agent

BARCELOS SILVA, RONALDO
3089 NW 29TH AVE.
BOCA RATON FL 33434

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

10/31/03

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/31/03

Daytime Phone #

354 4274770

CR2E040 (7/03)

AMERICA CLEANING & MAINTENANCE, INC.

3089 NW 29th AVE. - BOCA RATON, FL 33434

10/31/2003

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood - Secretary of State
DIVISION OF CORPORATIONS
P.O. BOX 1500
Tallahassee, Fl 32302-1500

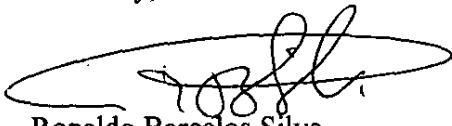
RE: REINSTATEMENT OF AMERICA CLEANING & MAINTENANCE - P01000010489

Dear Ms. Glenda E. Hood;

I would like to clarify that I never received any bill nor notice from this Department regarding 2003 UBR. I am sorry for lacking the knowledge that this is an annual bill that I have to file even if I do not receive a bill from you.

I am hereby requesting that you REINSTATE my company, I am attaching the reinstatement form duly signed plus a check for the 2003 annual fee according to the instructions we received from this department.

Sincerely;



Ronaldo Barcelos Silva
President