PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS			FILED OWHAR 16 AM 8:37
DOCUMENT # P01000060681 1. Corporation Name			SECRETARY OF STATE A TALLAHASSEE, FLORIDA
Alex Laundry Inc.			200030568902 03/16/0401074003 **158.75
2. Principal Office Address 3. Mailin 985 W. 60 ^{+h} St. 986		3. Mailing Office Address 985 W. 60th St.	200030568902 03/16/0401074002 **158.75
Suite, Apt. #, etc.		Suite, Apt. #, etc.	4. Date Incorporated or Qualified To Do Business in Florida 6/19/2001
City & State // / City		City & State //a/eah FC	5. FE! Number Applied For
· / ·Zip 33	0/2 Country	21p Country 330/2	6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Cartificate of Status
	7. Name and Address of Current Registered Agent		
Name Gustavo Mejia			
	Street Address (P.9. Box Number is Not Acceptable)		
	Suite, Apt. #, Etc.	60 / O/ Hr	HILLIAN ON THE PROPERTY OF THE
	City Haleah		State Zip Code S 3 3 0 1 2
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 Date Date			
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 Ea Officer and/or Direct	ch City / State / Zin
PSD	Gustavo Mejia	985 W Goth St.	Hakah Fl 33012
' -	Costavo) (Alex	7,00000	7, 40.07 2 2 2 7 2
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10.1 certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 507 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 507.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed of 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 Date Daylime Phone #			
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ALEX LAUNDRY, INC. 985 W 60TH STREET

985 W 60TH STREET HIALEAH, FLORIDA 33012

March 9, 2004

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Florida Department of State Division of Corporations 409 East Gaines Street Tallahassee, Fl. 32399

Attn: Reinstatement Section

Re: Document # P01000060681

Dear Sir or Madam:

In reference to a telephone conversation with one of your representatives, we are enclosing our application for reinstatement along with the necessary filing fees for a profit corporation for the years 2003 & 2004. As we stated in the phone conversation, we moved our offices and thus never received our UBR reports. We ask that you please pardon the late fee since this problem was due to circumstances beyond our control. If there is any problem processing this report please contact us immediately.

Sincerely,

Gustavo/Mejia President