PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.		
CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	04 MAR - 4 Při 1: 00 SECRETARY OF STATE TALLAM SSEF, FLORIDA
DOCUMENT # POIDC 1. Corporation Name Blast OFF INC	100 66557 Pressure Cleaning	
2. Principal Office Address Leb 3 30 Ave SW Suite, Apt. #, etc.	3. Mailing Office Address  Suite, Apt. #, etc.	- 900029936339 - 900029936339 - 03/05/0401011018 **300.00
City & State Verco Bench FL Zip Country 32968 USA	City & State  Zip Country	4. Date Incorporated or Qualified To Do Business in Florida  7-21-0  5. FEI Number Applied For Not Applicable  6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent  Name Milton My Devery  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, Etc.  City Vero Beach  State Zip Code  FL 3 2968		
8. I, being appointed the registered agent of the abo Signature of Registered Agent	we named corporation, am familiar with and accept the	obligations of section 607.0505 or 617.0503, F.S.  Date 2/29/0 4/
	d/or Director (Florida nonprofit corporations must list at	
Titles Name of Officers and/or Directors	Street Address of Ea Officer and/or Direc	
P Milton May	DURRY 663 30 MARES	W Verso Beach PL32468
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 filling 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:  SIGNATURE:		
SIGNATURE: / WWY Ur / SIGNATURE AND TYPED OR PR	HINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #

February 29, 2004

ا من م<del>عند</del>

Blast Off Pressure Cleaning Service Inc 663 30th Ave SW Vero Beach FL 32968

Florida Department of State **Division of Corporations** 409 East Gaines St Tallahassee, FL 32399

Dear Sir/Madam:

Please find enclosed the original Application for Reinstatement of our corporation, Precision Floors, Inc. (Document number P01000066557).

We had moved during 2003, and the original notices must have gotten lost between the moves. The enclosed application has our current and correct address.

We understand that by sending in \$300 will allow my corporation to be reinstated, and will pay the fee for both 2003 and 2004.

Please advise if any other information is needed. Thank you.

Sincerely,

Milton Mayberry, President

Telephone 772-563-0354

the teo for both 2001 and 100 at ें दें राज राम्मागुरुव to pa copie प्रवाद लाव असी केंग्रे No understand ther he soudings on 7000 with differ