

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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APPLICATION
FOR
REINSTATEMENT



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

FILED

03 NOV 26 PM 4:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P01000072817**

1. Corporation Name

MACK'S CLEANING SERVICE INC.

Principal Place of Business

Mailing Address

1010 SW 83RD AVE
N LAUDERDLAE FL 33068

1010 SW 83RD AVE
N LAUDERDLAE FL 33068



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

4. Date Incorporated or Qualified
To Do Business in Florida

07/23/2001

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0504214

Applied For

Not Applicable

City & State

City & State

33068 USA

Zip

Country

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	MCLEAN, DESMOND	1010 SW 83RD AVE	N LAUDERDLAE FL 33068

400025074534

11/26/03--01059--011 **150.00

REINSTATEMENT 03 ITS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MCLEAN, DESMOND
1010 SW 83RD AVE
N LAUDERDLAE FL 33068

Name

McLean, Desmond

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

1010 SW 83rd Ave.

Suite, Apt. #, Etc.

City

North Lauderdale

State

FL

Zip Code

33068

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

Desmond McLean

REGISTERED AGENT MUST SIGN

Date 11-18-03

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:

Desmond McLean

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-18-03

Date

Daytime Phone #

CR2E040 (7/03)

DAYCZOR

Mack's Cleaning Service, Inc.

1010 SW 83rd Avenue
North Lauderdale, FL 33068

October 27, 2003

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314


Re: Document #: P01000072817

Dear Sir or Madam:

I received the Notice of Administrative Dissolution or Revocation document from your office. I am not aware of receiving any other previous mailings from your office. This year there was a change in my business operations. My former accountant went out of business, which led me to find another. I received this notice and gave it to my new accountant to help me with this matter.

I have enclosed a check for \$150.00 for the 2003 Corporation Annual Report/Uniform Business Report Fee.

Sincerely,



Desmond McLean

Mack's Cleaning Service, Inc.
Director