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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING

APPROVED  
AND  
FILED

05 APR 21 AM 11:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P01000079527**

**1. Corporation Name**

**Industrial Cleaning Services of Florida Inc.**

**2. Principal Office Address**

**1951 NW 21<sup>st</sup> Street**

Suite, Apt. #, etc.

City & State

**Pompano Beach FL**

Zip  
**33069**

Country

**USA**

**3. Mailing Office Address**

**1951 NW 21<sup>st</sup> Street**

Suite, Apt. #, etc.

City & State

**Pompano Beach FL**

Zip  
**33069**

Country

**USA**

REINSTATEMENT **02-05**

**MRD**

**4. Date Incorporated or Qualified  
To Do Business in Florida**

**8-13-01**

**5. FEI Number**

**65-1129473**

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

**Michael J. Picazio**

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

**2101 Middle River Drive**

Suite, Apt. #, Etc.

City

**Fort Lauderdale**

State

**FL**

Zip Code

**33305**

~~800054222688~~  
05/10/05--01077--009 \*\*450.00

~~800054222688~~  
05/10/05--01077--010 \*\*150.00

**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

*Michael J. Picazio*

REGISTERED AGENT MUST SIGN

Date **4-18-05**

**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 Each Officer and/or Director	City / State / Zip
P	Michael J. Picazio	2101 Middle River Dr.	Fort Lauderdale FL 33305

**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 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:

*Michael J. Picazio*

**Michael J. Picazio 4-18-05 954-590-2102**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2001 (01/05)

2072

2101 Middle River Drive  
Fort Lauderdale FL 33305

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# Industrial Cleaning Services of Florida

April 19, 2005

2002AR

Division of Corporations, Department of State

Dear Sir or Madam:

I have not received my Uniform Business Report. I have discovered the mailing address you have on file (1331 South Dixie 1A, Pompano Beach FL) is incorrect. The correct address is 2101 Middle River Drive, Fort Lauderdale FL 33305. Please accept the enclosed \$450.00 payment and waive the late fees from this account.

Sincerely,



Michael J. Picazio  
President

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