

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 10 AM 9:32

SECRETARY OF STATE
 TALLAHASSEE FLORIDA

DOCUMENT # **P02000055233**

1. Corporation Name

TWINS WASH WORLD, INC.

Principal Place of Business

Mailing Address

~~315 SE 7TH ST 1ST FL
 FT LAUDERDALE FL 33301~~

~~315 SE 7TH ST 1ST FL
 FT LAUDERDALE FL 33301~~



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

REINSTATEMENT

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

05/18/2002

~~4911 JEFFERSON ST.~~

~~4911 JEFFERSON ST~~

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

~~City & State
 Hollywood FL.~~

~~City & State
 Hollywood FL.~~

~~01-0697340~~

Not Applicable

~~Zip
 33021~~

~~Country
 U.S.A.~~

~~Zip
 33021~~

~~Country
 USA~~

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
DP	EDWARDS, RICK	315 SE 7TH ST 1ST FL	FT LAUDERDALE FL 33301

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

EDWARDS, RICK
 315 SE 7TH ST 1ST FL
 FT LAUDERDALE FL 33301

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

[Signature]

Date

REGISTERED AGENT MUST SIGN

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] RICK EDWARDS
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-4-03
 Date

954-964-7510
 Daytime Phone #

CPRE040 (7/03)

TWINS WASH WORLD, INC.
4911 Jefferson Street
Hollywood, FL 33021

November 4, 2003

Division of Corporations
Annual Report/Reinstatement Section
PO Box 6327
Tallahassee, FL 32314-6327

To Whom It May Concern:

Please find enclosed our Application for Reinstatement. We did not receive the rejection letter, dated April 19th requesting our federal employer identification number that your office sent.

Please accept this letter and Application to Reinstatement our corporation.

Sincerely,



Rick Edwards