

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

PO2000096627

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 JAN 20 PM 12:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **PO2000096627**
1. Corporation Name
C R PRESSURE CLEANING & PAINTING, CORP.

| | | | |
|---|----------------------|----------------------------------|----------------|
| 2. Principal Office Address 4110 SW 7th PLACE | | 3. Mailing Office Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State CAPE CORAL, FL. | | City & State | |
| Zip 33914 | Country US | Zip | Country |

| | |
|--|--------------------------------------|
| 4. Date Incorporated or Qualified To Do Business in Florida 09/06/2002 | |
| 5. FEI Number 43-1973163 | Applied For Not Applicable |
| 6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status | |

BN

| | |
|--|--------------------|
| 7. Name and Address of Current Registered Agent | |
| Name JORGE REYES | |
| Street Address (P.O. Box Number is Not Acceptable) 4912 VINCENNES CT | |
| Suite, Apt. #, Etc. # 201 | |
| City CAPE CORAL, | State FL |
| Zip Code 33904 | |

500028230165
02/05/04--01015--019 **300.00

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 *[Signature]* **Date** 01/16/2004

REGISTERED AGENT MUST SIGN

| 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 | MANUEL CRUZ ARIAS | 4110 SW 7th PLACE | CAPE CORA, FL. 33914 |
| VP | JOSE A RAMIREZ | 4110 SW 7th PLACE | CAPE CORAL, FL. 33914 |
| S | VICENTE RAMIREZ | 4110 SW 7th PLACE | CAPE CORAL, FL. 33914 |
| | | | |
| | | | |

REINSTATEMENT 2003-2004

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: MANUEL CRUZ ARIAS **Date** 01/16/2004 **(239) 340 8946**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E031 (10/02)

PO2000096627

January 16, 2004

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
Attn.: Personal & Confidential
Buck Kohr

FILED
04 JAN 20 PM 12:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Reference: PO2000096627 – Corporation Reinstatement

I am sending this notice to explain to that I did not receive the form for renovation of the Registered Agent and Annual Report for the years 2003 and 2004.

I called previously to your office regarding to this matter. You explained and advised me to write to you and enclose a payment of \$ 300.00 (fee 2003 \$ 150.00 and fee 2004 \$ 150.00) in money order, which I am doing right now.

Thank you for your counsel and your time.

Sincerely,

BW

MANUEL CRUZ ARIAS

CR PRESSURE CLEANING & PAINTING, CORP.
Manuel Cruz Arias-President
4110 SW 7TH Place
Cape Coral, Fl. 33914