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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 FEB 19 AM 8:00

DOCUMENT # P02000109558

1. Corporation Name

Save on Cleaners of
Pembroke Pines Inc.

2. Principal Office Address

18471 Pines Blvd.

Suite, Apt. #, etc.

Pembroke Pines

City & State

Florida

Zip

33029

Country

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 03-04

400029037694
02/19/04--01005--025 **300.00

4. Date Incorporated or Qualified
To Do Business in Florida

10-10-2002

5. FEI Number

36-4509980

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

Marlene Leon-Robido Esq

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

Suite, Apt. #, Etc.

6780 Coral Way

City

Miami FL

State

FL

Zip Code

33155

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]
REGISTERED AGENT MUST SIGN

Date

2/13/04

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
D-	Oswaldo Rubio	18471 - Pines Blvd	Pembroke Pines FL 33029
D	Adela Kourany	Same	✓

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

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Oswaldo Rubio

Date

2/13/04

Daytime Phone #

CR2E081 (01/04)

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Marlene Leon-Rubido
Attorney At Law

Coral Way Law Center
6780 Coral Way
Miami, Florida 33155

Tel: (305) 596-2211
Tel: (305) 261-4000
Fax: (305) 669-9202

February 13, 2004

Division of Corporation
Florida Department of State
P.O. Box 6327
Tallahassee, Florida 32314
Attention: Reinstatement Section

RE: Save On Cleaners of Pembroke Pines, Inc.

Dear Sir or Madam:

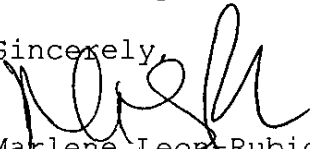
As per your instructions, enclosed are the following:

1. Corporate Reinstatement Form;
2. Check payable to the Department of State for \$300.00 representing the filing fee for 2003 and 2004.

Save On Cleaners requests that the reinstatement fee for this corporation be waived due to the fact that it did not receive the 2003 Annual Return. It was not aware that the corporation had been dissolved until recently. The Corporation was newly formed at the end of 2002 and started the business thereafter. During this transition period, the delivery of mail was difficult and incomplete.

Thank you for your courtesies and please do not hesitate to contact me if you have any questions.

Sincerely,


Marlene Leon-Rubido, Esquire

Enclosures