

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
05 APR 25 AM 10:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT 04-05

DOCUMENT # P02000112163

1. Corporation Name

#1 SMART CLEANERS INC.  
15016 NE 6 AVE  
N. Miami, FL 33161

2. Principal Office Address

15016 NE 6 AVE

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

N. Miami FL

City & State

Zip

33161

Country

USA

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

201893171

☒ 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

Kelly Suzette

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

1331 NE 147th Street

Suite, Apt. #, Etc.

City

N. Miami, FL 33161

State

FL

Zip Code

400054286244

05/11/05--01049--020 \*\*30.00

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

*Kelly Suzette*

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	Eugene Talabert	15016 NE 6 AVE N	N. Miami, FL 33161

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/15/05

Daytime Phone #

786-277-7611

CR20081 (01/04)

**F & P ACCOUNTING AND TAXES**

15018 NE 6 AVE

305-944-5523

TO: **ANDY DUNLAP**

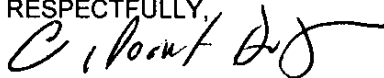
**# 1 SMART CLEANERS**

SUBJECT: **P 02000112163**

MY NAME IS COUTCHARD POINT DU JOUR AND I AM WRITING YOU IN REFERENCE TO YOUR LETTER DATED FEBRUARY 1, 2005. WITH THIS LETTER A CHECK MADE OUT TO THE STATE WAS ALSO RETURNED TO MY CLIENT. I PREPARED THE STATEMENT FOR MY CLIENT BECAUSE WE HAD RECEIVE A LETTER FROM YOUR OFFICE GIVING US THE RIGHT TO REINSTATE THE CORPORATION WITH A FILING FEE OF \$ 300.00. THAT LETTER WAS A RESPONSE TO AN AFFIDAVIT THAT I PERSONALLY WROTE TO YOUR OFFICE STATING THAT MY OFFICE HANDLES SMART CLEANERS ACCOUNTING AND WE DID NOT RECEIVE THIS COMPANY'S ANNUAL REPORT LAST YEAR AS A RESULT THE ANNUAL REPORT WAS NOT FILE BY THE CUSTOMER. UNFORTUNATELY I DO NOT HAVE A COPY OF MY LETTER AS WELL AS A COPY OF THE RESPONSE TO PROVE OUR CASE.

PLEASE VERIFY YOUR RECORD TO SEE IF YOU CAN FIND DOCUMENTS TO HELP YOU MAKE A DIFFERENT DECISION IF APPLICABLE.

RESPECTFULLY,



COUTCHARD POINT DU JOUR- ACCOUNTANT