

**2006 FOR PROFIT CORPORATION
REINSTATEMENT**

DOCUMENT # P03000053244

1. Entity Name
ONE STEP UP CLEANING SERVICE, INC.

FILED

06 JUN 15 PM 4:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDAPrincipal Place of Business
285 OHIO AVENUE
FORT MYERS BEACH, FL 33931Mailing Address
285 OHIO AVENUE
FORT MYERS BEACH, FL 33931

06092006 REIN-0 CR2E238 1/1/06

05-06

2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number: 54-2117202	Applied For (Not Applicable)
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MINOR, ESZTER 285 OHIO AVENUE FORT MYERS BEACH, FL 33931		7. Name and Address of Now Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent.

SIGNATURE: Eszter Minor / Eszter Minor 6/10/06
Handwritten, typed or printed name of registered agent and date of signature (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAXE, DANIEL J 285 OHIO AVENUE FORT MYERS BEACH, FL 33931	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST Saxe, Daniel J 285 Ohio Avenue Fort Myers Beach FL 33931
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Eszter Minor 285 Ohio Avenue Fort Myers Beach FL 33931
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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06/20/06--01062--006 ***300.00

12. I hereby certify that the information supplied with this filing complies with the requirements contained in Chapter 179, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate, and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of this corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, and in an attachment with an address, with all other the corporation.

SIGNATURE: Eszter Minor / Eszter Minor 6/10/06 (239) 340-2047
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Registered Agent