

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
06 AUG 15 PM 12:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000060117

1. Corporation Name

MD PRESSURE CLEANING, INC.

2. Principal Office Address

7337 STAR DUST DR.

3. Mailing Office Address

7337 STAR DUST DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33015

Country

Zip

33015

Country

REINSTATEMENT 05-06
CR2E081 (12/05)

4. Date Incorporated or Qualified To Do Business in Florida 06/02/2003

5. FEL Number 20-0031900

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 JOSEPH PATERNOSTRO ACCOUNTING SERVICES

Street Address (P.O. Box Number is Not Acceptable) 901 N.E. 125th St., Suite 101

Suite, Apt. #, Etc.

City NORTH MIAMI

State FL

Zip Code 33161

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

[Handwritten Signature]

Date 5/1/06

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	MICHAEL A. DODSON	15022 ROYAL PALM COURT	MIAMI LAKES, FL. 33014
			200079049472 08/23/06--01028--007 **150.00
			200079049472 08/23/06--01028--008 **150.00
		<i>[Handwritten Signature]</i>	

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 contained in Chapter 119, 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:

Michael Dodson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/01/06

Date

305-8167628

Daytime Phone #

Joseph Paternostro Accounting Services, Inc.

901 NE 125th Street, Suite 101

North Miami, FL 33161

E-mail: Paternostro@Mindspring.com

Office (305) 895-7355 Cell (305) 606-0935 Fax (305) 893-9696

July 25, 2006

Division of Corporations

P.O. Box 6198

Tallahassee, FL 32314

Re: MD Pressure cleaning, Inc.

FEI #: 20-0031900

Document #: P03000060117

To Whom It May Concern:

Reference is made to the above Corporation's Annual Report.

We are requesting abatement due to the post office never sending the forms.

Our checks # 7475 & # 7450 are enclosed to cover the cost of reinstatement for \$300.00.

Please reinstate the above mention corporation.

If you have any further questions, please don't hesitate of doing so at 305-895-7355.

Sincerely,



Joseph Paternostro
Accountant