

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

06 MAY -5 PM 1:41

STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P03000087325

1. Corporation Name

**FINE TOUCH CLEANING SERVICES, CORP.**

2. Principal Office Address

**766 RICH DR.**

Suite, Apt. #, etc.

**206**

City & State

**DEERFIELD BEACH, FL**

Zip  
**33441**

Country  
**USA**

3. Mailing Office Address

**766 RICH DR.**

Suite, Apt. #, etc.

**206**

City & State

**DEERFIELD BEACH, FL**

Zip  
**33441**

Country  
**USA**

RECEIVED  
CR2E081 (12/05)

04-06

4. Date Incorporated or Qualified  
To Do Business in Florida

**08/08/2003**

5. FEI Number

**20-0136671**

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  
**MARGARETH VIEIRA**

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

**766 RICH DR.**

Suite, Apt. #, Etc.

**206**

City  
**DEERFIELD BEACH**

State  
**FL**

Zip Code  
**33441**

**300075037893**

**05/22/06--01067--007 \*\*45.00**

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

*Margareth Vieira*  
REGISTERED AGENT MUST SIGN

Date

**05.03.06**

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
DP	MARGARETH VIEIRA	766 RICH DR. 206	DEERFIELD BEACH, FL 33441

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:

*Margareth Vieira*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**05.03.06**

Daytime Phone #

**754 231-0519**

2012

05/02/06

**TO: FLORIDA DEPARTMENT OF STATE**

**REF: FINE TOUCH CLEANING SERVICES, CORP.  
DOCUMENT # P03000087325**

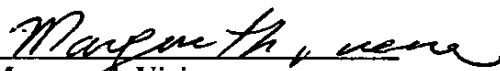
**Dear Sir or Madam,**

**This letter is to request the removal of Reinstatement fee for the above referred company.**

**Unfortunately, I was not aware that I should file the Uniform Business Report and pay it's fee annually, and I do not recall having received the UBR at my address.**

**I am sending a check in the amount of US 450.00 for the three years, including 2006, and would really appreciate, based on the information given above, my request is granted.**

**Thanks in advance for your help on this matter.**

  
**Margareth Vieira**  
**President.**