

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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06 JUL 26 AM 7:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P04000061614

1. Corporation Name

SPRING BLOOM LAWN SERVICES, INC

2. Principal Office Address

4521 NORTH WEST 25TH STREET

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LAUDERHILL, FLORIDA

City & State

Zip

33313

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

32-0114280

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 05-06

7. Name and Address of Current Registered Agent

Name

CARL S. PITTER

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

7435 NORTH WEST 57TH STREET

Suite, Apt. #, Etc.

City

TAMARAC

State

FL

Zip Code

33319

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

Date

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/T/S	MILLER, VETA	4521 NORTH WEST 25TH STREET	LAUDERHILL, FLORIDA 33313
D	MILLER, VETA	4521 NORTH WEST 25TH STREET	LAUDERHILL, FLORIDA 33313

700078380097
08/04/06--01043--007 **300.00

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: *X Veta Miller*

PRESIDENT

7/20/2006

Date

7/20/06

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

K. Eckel AUG 01 2006

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SPRING BLOOM LAWN SERVICE, INC
4521 NORTH WEST 25TH STREET
LAUDERHILL, FLORIDA 33313

July 18th, 2006

*State of Florida
Annual Report Filings
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32329*

*Re: 2005 Uniform Business Report
FEIN # 32-0114280
DOCUMENT # P04000061614*

Dear Sir/Madam:

Please be advised that my Corporation "SPRING BLOOM LAWN SERVICES, INC." was formed on April 7th, 2004. I was recently notified that my Corporation is no longer active due to the non-filing of the annual Uniform Business Report for the year 2005 and 2006. I did not receive this form and was not aware that this report is required to be filed with your office on an annual basis. Also my address was changed as shown above.

I called your office regarding this matter and was told that in this circumstance, I can download a blank Uniform Business Report form for the year 2006 and submit along with a check in the amount of \$300.00 and my reason for not filing on time.

I have enclosed the completed Uniform Business Reports form along with a check for \$300.00⁰⁰ was instructed by your office. Please accept this payment and process the Uniform Business Report for 2006.

Your kind consideration in accepting my filing fees and reinstating me will be greatly appreciated.

*Sincerely yours,
Veta Miller*

Veta Miller