2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000095717

Title:

Name:

Address:

City-St-Zip:

Entity Name: A-BETTA DRY CLEANING AND LAUNDE

FILED Aug 30, 2008 Secretary of State

Entity Nam	ie: A-BET	TA DRY CLEAN	IING AND LAUNDI	RY INC.				
Current Principal Place of Business:				New Princ	New Principal Place of Business:			
2971 NW 6 MIAMI, FL		EET						
Current Mailing Address:				New Mailing Address:				
2006 N 28T HOLLYWO		8020						
FEI Number:	65-0588323	FEI Number	Applied For()	FEI Number Not Appli	icable () Ce	rtificate of Status	s Desired (X)	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
DAVIS, VIN 2967 N. W. MIAMI, FL	62ND STR	REET JS						
The above in the State			tatement for the pu	rpose of changing it	s registered office	or registered	agent, or both,	
SIGNATUR								
	Elect	tronic Signature	of Registered Ager	nt		Date		
		7.193(2)(b), F.S., the cing Trust Fund Co		receive the prior notice	е.			
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD DAVIS, VIN 2967 N. W. MIAMI, FL	62ND STREET		Title: Name: Address: City-St-Zip:	()Cha	inge () Addition		
Title: Name: Address: City-St-Zip:	2006 N 28T	()Delete 8TH AVE, AVIS H AVE OD, FL 33020		Title: Name: Address: City-St-Zip:	()Cha	inge () Addition		
Title: Name: Address: City-St-Zip:	S SMITH, OLA 1654 NW 7 MIAMI, FL	5TH ST APT 109		Title: Name: Address: City-St-Zip:	S (X) Cha SMITH, OLA M 670 NW 6 STREET MIAMI, FL 33136	ange () Addition #609		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: VINCENT DAVIS PD 08/30/2008

() Delete

MCFORD, AVIS

2006 N 28TH AVE

HOLLYWOOD, FL 33020

() Change () Addition