

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

1k

06 JUN -2 PM 4:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT 		FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P04000109983			
1. Corporation Name Rivera Painting and cleaning Services, Corp			
2. Principal Office Address 242 West 32nd ST		3. Mailing Office Address "	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Hialeah, FL		City & State "	
Zip 33012	Country U.S.A	Zip "	Country "

REINSTATEMENT 05-06

4. Date Incorporated or Qualified To Do Business in Florida 7/23/04	Applied For ☒
5. FEI Number	Not Applicable
6. CERTIFICATE OF STATUS DESIRED ☐	

7. Name and Address of Current Registered Agent	
Name Fabian Rivera	
Street Address (P.O. Box Number is Not Acceptable) 242 West 32nd ST -	
Suite, Apt. #, Etc.	
City Hialeah	State FL
Zip Code 33012	

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 <i>Fabian Rivera</i>
Date 4/6/06

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PO	Fabian Rivera	242 West 32 ST	Hialeah, FL 33012.
VD	Ibis Hernandez	242 West 32 ST	Hialeah, FL 33012.

800077385218
07/12/06--01017--012 **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 under section 119.07(3)(f), 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: <i>Fabian Rivera</i>	Date 4/6/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Daytime Phone # 786-261-7920

2/2

RIVERA PAINTING AND CLEANING SERVICES, CORP.
242 WEST 32 ST
HIALEAH, FL 33012
786.419.0186

April 06, 2006

Florida Department of State
Division of Corporations

Re: **RIVERA PAINTING AND CLEANING SERVICES, CORP.**
P04000109983

To Whom It May Concern,

As per my telephone conversation with your office, with this letter I am asking that the penalty please be waived for the corporation. We did not receive notification in *2005 + 2006* in the mail, so thank you in advance for your time and consideration.

Sincerely,

Fabian Rivera
President

