

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000003587

Entity Name: A&G CLEANING PLUS INC

FILED
Oct 18, 2006
Secretary of State

Current Principal Place of Business:

42 GULF BLVD #2
INDIAN ROCKS BEACH, FL 33785

New Principal Place of Business:

Current Mailing Address:

42 GULF BLVD #2
INDIAN ROCKS BEACH, FL 33785

New Mailing Address:

FEI Number: 20-2263704

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, GALE
42 GULF BLVD #2
INDIAN ROCKS BEACH, FL 33785 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: GALE NELSON

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: ARAUJO, ANTONIO
Address: 42 GULF BLVD #2
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: VP/D () Delete
Name: NELSON, GALE
Address: 42 GULF BLVD #2
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: T/S () Delete
Name: NELSON, GALE
Address: 42 GULF BLVD #2
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: NELSON, GALE
Address: 42 GULF BLVD #2
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: GALE NELSON

Electronic Signature of Signing Officer or Director

P/D

10/18/2006

Date