

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

08 FEB -4 PM 2:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000017680

1. Corporation Name

NHAN'S Cleaning Service Inc.

2. Principal Office Address - No P.O. Box #

4618 West Oak Ridge Rd.

Suite, Apt. #, etc.

City & State

Orlando

Zip

32809

Country

U.S.A

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

1

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

2/3/2005

5. FEI Number

☒ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

CR2E081 (12/07)

7. Name and Address of Current Registered Agent

Name

Nhan Nguyen

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

4618 West Oak Ridge Rd.

Suite, Apt. #, Etc.

City

Orlando

State

FL

Zip Code

32809



The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

1/23/08

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	NHAN NGUYEN	4618 W. OAKRIDGE RD.	ORLANDO, FL 32809

REINSTATEMENT 06-08

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/23/08

Daytime Phone #

AFFIDAVIT OF NOT RECEIVING ANNUAL REPORT NOTICES

Dear Sir/ Madam:

I am , Nhan Nguyen, the President of the NHAN'S CLEANING SERVICES INC . I start doing business in 2005, and never received a annual report notices since then. I can not imagine what size it is. I came and asked my tax preparer. I was told that it looked like a business card but it's size is about twice bigger.

Please reconsider my situation.

Thank you from the bottom of my heart.

Sincerely,



Nhan Nguyen.

Sworn to and
subscribed before me
this 23 day of Jan,
2008

