

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000058520

**FILED**  
**Oct 15, 2009**  
**Secretary of State**

**Entity Name:** ALL CLEAN AIR SOLUTIONS CORP.

**Current Principal Place of Business:**

8004 NW 154 ST, STE 445  
MIAMI LAKES, FL 33016

**New Principal Place of Business:**

**Current Mailing Address:**

8004 NW 154 ST, STE 445  
MIAMI LAKES, FL 33016

**New Mailing Address:**

**FEI Number:** 20-2797497

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GIL, MARY  
8981 NW 148TH TERRACE  
MIAMI, FL 33018 US

**Name and Address of New Registered Agent:**

GIL, MARY  
8004 NW 154 ST, STE 445  
MIAMI, FL 33016 US

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: MARY GIL

10/15/2009

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 ( ) Delete  
Name: GIL, MARY  
Address: 8004 NW 154 ST, STE 445  
City-St-Zip: MIAMI LAKES, FL 33016

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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.

SIGNATURE: MARY GIL

P

10/15/2009

Electronic Signature of Signing Officer or Director

Date