

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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APPLICATION FOR



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000092236

1. Corporation Name

ADVANCED WINDOW CLEANING, INC.

FILED

01 OCT 24 PM 12:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

9643 TAVERNIER DRIVE  
BOCA RATON FL 33496

Mailing Address

12246 ROCKLEDGE CIR.  
BOCA RATON FL 33428  
US



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

21346 St. Andrews Blvd  
Boca Raton, FL 33433

3. New Mailing Office Address, If Applicable

21346 St. Andrews Blvd  
Boca Raton, FL 33433

4. Date Incorporated or Qualified To Do Business in Florida

12/19/1994

5. FEI Number

65-0556552

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	RAMUS, ANDREW G	12246 ROCKLEDGE CIR	BOCA RATON FL 33428
			600004674726 - 1 -11/13/01--01004--014 ***150.00 - ***150.00

01/17/01 YDR

8. Name and Address of Current Registered Agent

RAMUS, ANDREW G  
12246 ROCKLEDGE CIR.  
BOCA RATON FL 33428

9. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
Suite, Apt. #, Etc.  
City State Zip Code  
FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

[Handwritten Signature]

REGISTERED AGENT MUST SIGN

Date

10-2-01

11. 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)(i), 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:

[Handwritten Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-2-01

Daytime Phone #

561-789-1300

CR2E040 (8/01)

paperwork

Dear Department of State

My name is Andrew Ramus, I have been consistently paying my dues on time for 12 years. This past year I moved three times due to a divorce, I had no idea during this time I missed your mail. Please consider or accept my payment, I am personally going bankrupt and my business is all I have. My address is now 9900 Grand Verde way, Boca Raton, FL 33428. I am in arrears in my support payments and can use your understanding. You can contact me on my new number 561-789-1300.

Sincerely Thank you,

Andrew Ramus



Advanced Window Cleaning