

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED

98 APR 16 PM 3:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000028624

1. Corporation Name

MY CLEANERS INC.

Principal Place of Business

~~1406 S.E. 17th Street~~  
FT. LAUDERDALE FL 33316

Mailing Address

~~1406 S.E. 17th Street~~  
FT. LAUDERDALE FL 33316

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

2. New Principal Office Address, If Applicable

1406 S.E. 17th Street

Suite, Apt. #, etc.

City & State

Ft. Lauderdale FL

Zip 33316

Country

3. New Mailing Office Address, If Applicable

1406 S.E. 17th Street

Suite, Apt. #, etc.

City & State

Ft. Lauderdale FL

Zip 33316

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

04/02/1996

5. FEI Number

65-0656001

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	FUNDILLER, MIKE	1406 S.E. 17th Street	FT. LAUDERDALE FL 33316
D	FUNDILLER, JACK	1406 S.E. 17th Street	FT. LAUDERDALE FL 33316
<del>D</del>	<del>FLEISCHMAN, ANNE</del> Delete	<del>1406 S.E. 17th Street</del> Delete	<del>FT. LAUDERDALE FL 33316</del> Delete
			200002494612--9 -04/21/98--01021--009 ****900.00 ****900.00

8. Name and Address of Current Registered Agent

~~PATRICK, MARTY~~  
~~1141 KANE CONCOURSE~~  
~~BAY HARBOR ISLANDS FL 33154~~

9. Name and Address of New Registered Agent

Name

Michael Fundiller

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

1406 S.E. 17th Street

Suite, Apt. #, Etc.

City

Ft. Lauderdale

State

FL

Zip Code

33316

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

REGISTERED AGENT MUST SIGN

Date

4/9/98

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information  
on intangible tax.)

12. 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)(l), 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:

Pres. Michael Fundiller  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/98  
Date

954-764-0533  
Daytime Phone #

CR2040 (9/97)