

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 FEB 18 AM 10:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P970000001056**

1. Corporation Name
VELASQUEZ CARPET SERVICE, INC.

2. Principal Office Address
3380 NW 151 TERRACE

Suite, Apt. #, etc.

City & State
MIAMI, FLORIDA

Zip Country
33054 USA

3. Mailing Office Address
3380 NW 151 TERRACE

Suite, Apt. #, etc.

City & State
MIAMI, FLORIDA

Zip Country
33054 USA

REINSTATEMENT 98-05

4. Date Incorporated or Qualified
To Do Business in Florida **01/06/97**

5. FEI Number
65-0716141

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
VELASQUEZ, EDGAR

Street Address (P.O. Box Number is Not Acceptable)
14920 SW 151 TERRACE

Suite, Apt. #, Etc.

City
MIAMI

State Zip Code
FL 33196

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

Date **02/15/05**

REGISTERED AGENT MUST SIGN

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
PD	VELASQUEZ, EDGAR	14920 SW 151 TERRACE	MIAMI, FLORIDA 33196
VD	ACOSTA, MARTHA	14920 SW 151 TERRACE	MIAMI, FLORIDA 33196

900047592149
03/03/05--01056--021 **1200.00

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/15/05

Date

(786) 443-1697

Daytime Phone #

CR2E001 (01/05)

262

Miami, Florida
January 2005

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: P97000001056
VELASQUEZ CARPET SERVICE INC.
3380 NW 151 TERRACE
MIAMI, FL 33054


To Whom It May Concern:

This letter intends to inform you that our Annual Report was not filed due to the fact that we never received such notice or notices to file. Upon our conversation I am enclosing the Corporation Reinstatement with the payment of \$1200.00 dollars as per your request.

Please be so kind to waive any late fees that I might have and to put this corporation in its current status.

Thank you for your help and I hope that this can solve this matter and avoid further penalties.

Respectfully,



EDGAR VELASQUEZ
PRESIDENT