

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 APR 25 AM 8:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000050824

1. Corporation Name

A F CLEANERS, INC.

2. Principal Office Address

120 SW 13 Street

Suite, Apt. #, etc.

City & State

Miami Florida

Zip

33130

Country

US

3. Mailing Office Address

120 SW 13 Street

Suite, Apt. #, etc.

City & State

Miami Florida

Zip

33130

Country

US

600017115266

04/25/03--01082--021 **308.75

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-0763253

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

Antonio Figueroa Jr.

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

120 SW 13 Street

Suite, Apt. #, Etc.

City

Miami

State
FL

Zip Code

33130

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

4/21/03

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
D	Antonio Figueroa	120 SW 13 Street	Miami FL 33130

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] Antonio Figueroa

Date

4/21/03

Daytime Phone #

786-586-3075

CR2E081 (10/02)

27 4/25