PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATIONS FLORIDA DEPARTMENT OF S Katherine Harris Secretary of State DIVISION OF CORPORATIONS	TATE TATE TATE TOTAL TARY OF STATE TOTAL TARY OF STATE OF DEC 10 PM 3:27
DOCUMENT # P9700097507 1. Corporation Name	
American Home Cleaning, Inc	
2. Principal Office Address 3. Mailing Office Address 3321 W. OAKSt. — 3321 W. OAKS	<u> </u>
3321 W. OAK St. — 3321 W. OAK S Suite, Apt. #, etc. Suite, Apt. #, etc.	4. Date Incorporated or Qualified
City & State City & State	To Do Business in Florida 5. FEI Number Applied For
Kissinnee Fl Kissinnee F	59-3477780 Not Applicable
34741 Osceola 34741 Osceol	CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent Name	
William D. Phillips 5000047267351. Street Address (P.O. Box Number is Not, Acceptable) -12/14/0101047017 Loon Horse Shoe C+ *****158.75 Suite, Apt. #, Etc.	
Winter Haven FL 33881	
8. I, being appointed the registered agent of the above named of poration, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN Date 12/4/01	
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)	
Titles Name of Street Addre Officers and/or Directors Officer and/or	or Director City/ State / ZID
Pres Patricia F. Harrison Oviedo, Fl 32765 Oviedo Fl 32765	
V.P. William D. Phillips 607 Horseston Ct Winter Haven F1 33881	
Sec. Angela Pallares 450 Hunter Circle Poinciana F1 34758	
\$912/13	
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 filling 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.	

2) OD William D. Phillips 12/4/01 401-933-2500
SIGNATURE AND TYPED OR PRINTED ME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #

American Home Cleaning

3321 W. Oak St. ♦ Kissimmee, FI 34741
Phone 407-933-7500 ♦ Fax 407-933-1447
email:americanhomeclea@aol.com

12/04/01

Dept. of State Division of Corporations PO Box 6327 Tallahassee Fl 32314

To whom it may concern:

We did not receive a bill for our corporate filing fees. Please be sure the address information you have on file is correct.

Sincerely,

William D. Phillips

Vice President & Registered Agent

American Home Cleaning, Inc