

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION
REINSTATEMENT



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

FILED

00 FEB -7 PM 12:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000003228

1. Corporation Name

Tropical Splash Car Wash, Inc.

2. Principal Office Address

5595 N. Wickham Road

Suite, Apt. #, etc.

3. Mailing Office Address

5595 N. Wickham Road

Suite, Apt. #, etc.

City & State

Melbourne, FL

City & State

Melbourne, FL

Zip

32940

Country

USA

Zip

32940

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

1/13/98

5. FEI Number

59 348 9746

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

SP

7. Name and Address of Current Registered Agent

Name

Wendy J. Arteaga

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

5595 N. Wickham Road

Suite, Apt. #, Etc.

8000003141668-0

-02/21/00--01092-022

****300.00 ****300.00

City

Melbourne

State

FL

Zip Code

32940

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

Wendy J. Arteaga

REGISTERED AGENT MUST SIGN

Date

1/30/2000

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
P, D, S	Wendy J. Arteaga	5595 N. Wickham Road	Melbourne, FL 32940
D, T	David Arteaga	5595 N. Wickham Road	Melbourne, FL 32940

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:

Wendy J. Arteaga

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/2000

Date

(321) 253-6050

Daytime Phone #

CR2E081 (9/99)

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KRASNY AND DETTMER
A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS
ATTORNEYS AND COUNSELORS AT LAW

THE RIVERFRONT BUILDING
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*FLORIDA SUPREME COURT CERTIFIED
MEDIATOR-ARBITRATOR

^ΔBOARD CERTIFIED IN TAXATION

†ALSO CERTIFIED PUBLIC ACCOUNTANT

[◊]ADMITTED COLORADO BAR

February 3, 2000

Secretary of State
Department of Corporations
P.O. Box 6327
Tallahassee, FL 32301

Att.: Reinstatement

Re: Tropical Splash Car Wash, Inc.

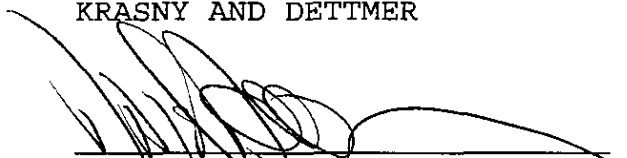
Gentlemen:

This firm represents the above-referenced corporation. At the time the Annual Report for 1999 was forwarded to the corporation it was sent to an improper address, i.e. my former mailing address as registered agent. The document was never forwarded to the above address and therefore, the report was never received. I would ask that you waive the reinstatement fees and accept the enclosed report along with the fees for 1999 and 2000 in the amount of \$300.00 to reinstate the corporation.

Thank you for your assistance in this matter.

Very truly yours,

KRASNY AND DETTMER



Dale A. Dettmer

DAD:sc
Enc.