

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 NOV -4 PM 1:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000029410

1. Corporation Name

BLICK'S POWER WASH, INC.

Principal Place of Business

2632 SILVER PALM DRIVE
EDGEWATER FL 32141

Mailing Address

2632 SILVER PALM DRIVE
EDGEWATER FL 32141

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

03/31/1998

5. FEI Number

59-3503277

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PTD	BLICKER, MICHAEL F	2632 SILVER PALM DRIVE	EDGEWATER FL 32141
VD	BLICKER, MICHAEL C	2632 SILVER PALM DRIVE	EDGEWATER FL 32141
SD	BLICKER, MARIE J	2632 SILVER PALM DRIVE	EDGEWATER FL 32141
SD	Blicker, Michael F.	2632 Silver Palm Dr.	EDGEWATER, FL 32141
			500008792595 11/04/02--01110--014 **150.00
			11/04/02--01110--014 **150.00

8. Name and Address of Current Registered Agent

BALDWIN, YVONNE L
931 S RIDGEWOOD AVE
UNIT B-7
EDGEWATER FL 32132

9. Name and Address of New Registered Agent

Name SLATER FINANCIAL SERVICES, INC.
Street Address (P.O. Box Number is Not Acceptable)
3869 S. NOVA RD #1
Suite, Apt. #, Etc.
City PORT ORANGE State FL Zip Code 32127

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. or 617.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

10-31-02

11. 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

Michael F. Blicker

Date

Daytime Phone #

10-31-02 386-428-5001

CR2E040 (8/02)

BLICK'S POWER WASH INC.

333 NORTH US1
EDGEWATER, FL 32132
VOLUSIA

Phone 386-428-5001
Fax 386-428-5755

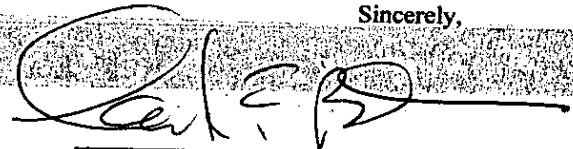
November 01, 2002

Division Of Corporations Annual Report
PO Box 6327
Tallahassee, FL 32314-6327

To Whom It May Concern,

This is the first notice of dissolution or revocation that I have received from you. I fired my old accountant and she never forwarded this information to me. I called your office and was advised to send a letter along with a check for \$150.00. I hope that this clears up this matter.

Sincerely,



President of Blick's Power Wash Inc.