

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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| APPLICATION FOR REINSTATEMENT |  FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # P98000087258

1. Corporation Name

HANDS ON CARWASH, INC

Principal Place of Business

1123 NE 5TH STREET
CRYSTAL RIVER FL 34429

Mailing Address

1123 NE 5TH STREET
CRYSTAL RIVER FL 34429

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Edward Lommel
16 S. Harrison St
Beverly Hills FL

Zip

Country

34465

Country

Citrus

4. Date Incorporated or Qualified To Do Business in Florida

10/09/1998

5. FEI Number

59-3537998

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)

| 1 | 2 | 3 | 4 |
|----------|-----------------------------------|--|------------------------|
| Title(s) | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
| PCEO | LOMMEL, EDWARD | 1123 NE 5TH STREET | CRYSTAL RIVER FL 34429 |
| CFOS | LOMMEL, EDWARD | 1123 NE 5TH STREET | CRYSTAL RIVER FL 34429 |
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000003039960--4
-11/09/98-01074-008
****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LOMMEL, EDWARD
16 S HARRISON STREET
BEVERLY HILLS FL 34465

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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.

Signature of Registered Agent

Edward Lommel

REGISTERED AGENT MUST SIGN

Date

10/22/98

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:

Edward Lommel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/22/98

Daytime Phone #

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

October 22, 1999

Re: Hands On Carwash, Inc.
P98000087258

Please be advised that the mailing address for Hands On Carwash, Inc. is incorrect. Any mail previously sent to this address was not placed in a proper mail receptacle. It was left on the ground at the open air carwash. The correct mailing address should be: 16 South Harrison Street, Beverly Hills, FL 34465.

Due to the problems in receiving forms and other documents through the mail from the State of Florida, we have not filed our appropriate paperwork. We would like to clear up this situation with this correspondence. Additionally, we are enclosing the application for reinstatement and a check for \$150.

If there is any other information needed, please contact me at the above referenced address, or you may send the documents directly to my accountant: Joe Calabro, 35 South Melbourne Street, Beverly Hills, FL 34465, phone (352) 527-2866.

Thank you.

Sincerely,

Edward Lommel
Edward Lommel