

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # P99000013628

1. Corporation Name

LIGHTHOUSE POINT CARWASH, INC.

Principal Place of Business

1361 SOUTH OCEAN BLVD. #902
POMPANO BEACH FL 33062

Mailing Address

1361 SOUTH OCEAN BLVD. #902
POMPANO BEACH FL 33062

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

2. New Principal Office Address, If Applicable

1401 S. Ocean Blvd
Suite, Apt. #, etc.
1009

3. New Mailing Office Address, If Applicable

1401 S. Ocean Blvd
Suite, Apt. #, etc.
1009

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

02/11/1999

5. FEI Number

65-0899090

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 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PSTD	RITTENHOUSE, DAVID	1361 SOUTH OCEAN BLVD. #902	POMPANO BEACH FL 33062

8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

9. Name and Address of New Registered Agent

Name
David Rittenhouse
Street Address (P.O. Box Number is Not Acceptable)
1401 S. Ocean Blvd
Suite, Apt. #, Etc.
1009
City
Pompapo Bch
State
FL
Zip Code
33062

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

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date 10/18/00

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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David Rittenhouse

Date 10/18/00

Daytime Phone # 954-788-9474

Date

Daytime Phone #

FILED

00 OCT 23 AM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT

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