

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 -5 PM 12:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P99000025428

1. Corporation Name

BNH CARPET CARE, INC.

Principal Place of Business

1194 DORCHESTER ST  
PORT CHARLOTTE FL 33952

Mailing Address

1194 DORCHESTER ST  
PORT CHARLOTTE FL 33952

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

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

03/15/1999

5. FEI Number

65-0906538

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
PSTD	HISHMEH, BASIM N	1194 DORCHESTER ST	PORT CHARLOTTE FL 33952

200008812252  
11/05/02--01100--022 \*\*150.00

8. Name and Address of Current Registered Agent

HISHMEH, BASIM N  
214 E TARPON BLVD  
PORT CHARLOTTE FL 33952

9. Name and Address of New Registered Agent

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. or 617.0505, F.S.

Signature of  
Registered Agent

SIGNATURE REQUIRED  
*Basim N. Hishmech*

REGISTERED AGENT MUST SIGN

Date 11-01-02

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 REQUIRED  
*Basim N. Hishmech*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-01-02

Date

941-613-0558

Daytime Phone #

CR2E040 (8/02)

11-01-02

I, Basim Hishmeh of B.N.H.  
carpet care Inc. did not receive  
first or second notice for the  
U.B.R. I am President & registered  
agent of company

Thank you  
Basim N. Hishmeh