

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

PHYP 10/22

APPLICATION
FOR



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

FILED

00 OCT 30 AM 11:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000104076

1. Corporation Name

G.A. BUILDING JANITORS, INC.

Principal Place of Business

Mailing Address

13338 S.W. 60TH TERRACE
MIAMI FL 33183

13338 S.W. 60TH TERRACE
MIAMI FL 33183

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

12/01/1999

5. FEI Number

65-0964358

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
PD	RAFFAN, ANA B	13338 S.W. 60TH TERRACE	MIAMI FL 33183

8. Name and Address of Current Registered Agent

RAFFAN, ANA B
13338 S.W. 60TH TERRACE
MIAMI FL 33183

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.

Signature of
Registered Agent

Ana B Raffan

REGISTERED AGENT MUST SIGN

Date 10-23-2000

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:

Ana B Raffan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/23/2000

Date

305-388-5171

Daytime Phone #

CR2E040 (8/00)

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FLORIDA DEPARTMENT OF STATE
REINSTATEMENT SECTION
TALLAHASSEE, FLORIDA

DEAR SIR/MADAM

ENCLOSED PLEASE FIND THE APPLICATION OF REINSTATEMENT FOR
G.A.BUILDING JANITORS INC. # p99000104076.

WE SENT THE 2000 ANNUAL REPORT ON APRIL 5, 2000 WITH THE REQUIRED
\$150.00 FEE. SUBSEQUENTLY, YOUR DEPARTMENT SAID THERE WAS
CORRESPONDENCE SENT TO US REQUESTING THE FEDERAL ID # MISSING FROM
THE ORIGINAL ANNUAL REPORT, HOWEVER WE HAVE NOT RECEIVED OR HAVE
RECORD OF EVER RECEIVING ANY CORRESPONDENCE OTHER THAN THE
NOTICE OF ADMINISTRATION DISSOLUTION WHICH IT WAS RECENTLY RECEIVED
IN THE MAIL.

PLEASE FORGIVE US THE REINSTATEMENT FEE OF \$600.00. WE ^{HAD} NO
KNOWLEDGED OF THE MISSING INFORMATION.

Ana B Raffan
ANA B, RAFFAN, PRESIDENT 10-22-2000