

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 OCT 30 PM 3:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P99000104143

1. Corporation Name

GOYETTE CLEANING CORP.

Principal Place of Business

1657 NE SOTTONG AVENUE  
JENSEN BEACH FL 34957

Mailing Address

1657 NE SOTTONG AVENUE  
JENSEN BEACH FL 34957

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

12/01/1999

5. FEI Number

65-0965228

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
D	GOYETTE, LARRY P	1657 NE SOTTONG AVENUE	JENSEN BEACH FL 34957
D	GOYETTE, DENISE L	1657 NE SOTTONG AVENUE	JENSEN BEACH FL 34957

8. Name and Address of Current Registered Agent

GOYETTE, LARRY P  
1657 NE SOTTONG AVENUE  
JENSEN BEACH FL 34957

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]*  
REGISTERED AGENT MUST SIGN

Date

10-02

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]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10-02

CR2E040 (8/02)

GOYETTE CLEAN CORP  
1657 NE SOTTONG AVE.  
JENSEN BEACH FL. 34957

RE: DOCUMENT #P99000104143  
FEI # 65-0965228

To Whom It May Concern,

We wish to reinstate our corporation but, did not receive any notice by the state except for this notice.

Please find inclosed a cgeck for \$150.00 to reinstate.

Thank -you

Denise

GOYETTE CLEAN INC.

*Denise Goyette*