

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**

01-03



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 MAY 16 AM 8:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000111880

1. Corporation Name

ANGIE'S DETAILED CLEANING SERVICE, INC.

2. Principal Office Address

126 SPANISH OAK LANE

Suite, Apt. #, etc.

City & State

APOPKA, FL

Zip

32703

Country

US

3. Mailing Office Address

126 SPANISH OAK LANE

Suite, Apt. #, etc.

City & State

APOPKA, FL

Zip

32703

Country

US

800019182938
05/16/03--01063--008 **450.00

4. Date Incorporated or Qualified
To Do Business in Florida

12/30/1999

5. FEI Number

59-3619846

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

DEAN MEAD SERVICES, LLC

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

800 NORTH MAGNOLIA AVE

Suite, Apt. #, Etc.

1500

City

ORLANDO

State

FL

Zip Code

32803

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Steven C. Lee, V.P.
REGISTERED AGENT MUST SIGN

Date

5-15-03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D/P	ANGELINE AREU	126 SPANISH OAK LANE	APOPKA, FL 32703

10. 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:

Angeline Areu
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANGELINE AREU, PRES.

Date

5-12-03

407.389.3063

Daytime Phone #

91 512L

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P99000111880

1. Corporation Name

ANGIE'S DETAILED CLEANING SERVICE, INC.

2. Principal Office Address

126 SPANISH OAK LANE

Suite, Apt. #, etc.

City & State

APOPKA, FL

Zip

32703

Country

US

3. Mailing Office Address

126 SPANISH OAK LANE

Suite, Apt. #, etc.

City & State

APOPKA, FL

Zip

32703

Country

US

**4. Date Incorporated or Qualified
To Do Business in Florida**

12/30/1999

5. FEI Number

59-3619846

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

DEAN MEAD SERVICES, LLC

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

800 NORTH MAGNOLIA AVE

Suite, Apt. #, Etc.

1500

City

ORLANDO

State

FL

Zip Code

32803

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Steven C. Lee, V.P.
REGISTERED AGENT MUST SIGN

Date

5-15-03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D/P	ANGELINE AREU	126 SPANISH OAK LANE	APOPKA, FL 32703

10. 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)(l), 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:

Angeline Areu
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANGELINE AREU, PRES.

Date

5-12-03

407.389.3063

Daytime Phone #

87 572

DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P. A

ATTORNEYS AND COUNSELORS AT LAW

P. O. BOX 2346
ORLANDO, FLORIDA 32802-2346

800 NORTH MAGNOLIA AVENUE
SUITE 1500
ORLANDO, FLORIDA 32803

(407) 841-1200
FAX (407) 423-1831

Writer's E-Mail
CMatthews@deanmead.com

www.deanmead.com

Writer's Direct Dial
(407) 428-5100 ext 4508

May 15, 2003

VIA AIRBORNE EXPRESS

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

Re: Application for Corporation Reinstatement of Angie's Detailed Cleaning
Service, Inc.

Dear Sir or Madam:

Enclosed are an original and one copy of an Application for Corporation
Reinstatement to be filed for Angie's Detailed Cleaning Service, Inc.

Also enclosed is the corporation's check number 1011 in the amount of \$450.00
in payment of the reinstatement fee.

After the Statement has been filed, please return the copy stamped with the date
of filing to this office.

Sincerely,



Carl W. Matthews, Paralegal

Enclosures

cc: Stephen D. Dunegan, Esq.
Angeline Areu, President