

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

02 NOV 26 PM 1:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S32501

1. Corporation Name

Coin-O-Magic Laundry & Dry Cleaning, Inc

Principal Place of Business

2109 Main St
Dunedin, FL 34691-3621

Mailing Address

2109 Main St
Dunedin, FL 34691-3621

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

2. New Principal Office Address, If Applicable

1123 N Highland Ave
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

1123 N Highland Ave
Suite, Apt. #, etc.

City & State

Clearwater FL 33755

City & State

Clearwater FL

Zip

33755

Country

USA

Zip

33755

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

2-15-1991

5. FEI Number

59-3058621

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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	JACK Oskan	501 Ft. Harrison Ave	Clearwater FL 33755
D	Mayda Oskan	501 Ft. Harrison Ave	clearwater FL 33755

8. Name and Address of Current Registered Agent

JACK Oskan
2109 Main St
Dunedin, FL 34689

9. Name and Address of New Registered Agent

Name
At-Your-Service-Tax & Accounting, Inc
Street Address (P.O. Box Number is Not Acceptable)
1123 N. Highland Ave
Suite, Apt. #, Etc.
City
Clearwater
State
FL
Zip Code
33755

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

REGISTERED AGENT MUST SIGN

Date 11-22-02

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.

Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-22-02 (727) 447-089
Date Daytime Phone #

CR200110298