PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE APPLICATION Sandra B. Mortham FILED **FOR** Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS 98 DEC 29 PM 3: 17 S93973 DOCUMENT # SECRETARY OF STATE TALLAHASSEE, FLORIDA 1. Corporation Name TAVERNIER PRESSURE CLEANING, INC. Principal Place of Business Mailing Address 91885 OVERSEAS HWY P O BOX 825 TAVERNIER FL 33070 TAVERNIER FL 33070 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 Date Incorporated or Qualified
To Do Business in Florida 11/12/1991 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For City & State City & State 65-0294749 Not Applicable \$8.75 Additional Fee requi Country Country 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Title(s) City / State / Zip Officer and/or Director (Do NOT Use Post Office Box Numbers) D THOMPSON, MARGARET 91865 OVERSEAS HWY TAVERNIER FL REINSTATEMENT C ****750.00 ****750.00 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent THOMPSON, MARGARET Street Address (P.O. Box Number is Not Acceptable) 91865 OVERSEAS HWY Suite, Apt. #, Etc. TAVERNIER FL 33070 Cifv State Zin 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. ALDISOLUTION REGISTERED AGENT MUST SIGN This corporation owes or has paid the current year (See other side for information on intangible tax.) Intangible Personal Property tax due June 30. Yes L No l 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 filling 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. MARGARET

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