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FLORIDA DEPARTA Sandra B. Secretary	Mortham FILED
DOCUMENT # V24522 1. Corporation Name CART KLEENER, INC.	97 OCT 29 PM 1: 18 SECHEDATY OF STATE TALLAMASSEE, FLORIDA
Principal Place of Business 11380 W TEACH RD 11380 W TEACH RD 11380 W TEACH RD 225-MONET ROAD. WE PALM BEACH FILESHID P & CARDEAS US If above addresses are incorrect in any way, line through incorrect information and e	
2. New Principal Office Address, If Applicable 3. New Mailing Office Address Sulter Applicable 3. New Mailing Office Address S	4. Date Incorporated or Qualified To Do Business in Florida 5. FEI Number 65-0323052 Applied For Not Applicable 6. \$8.75 Additional Fee required
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Title(s) D BRASWELL, GENE CERTIFICATE OF STATUS DESIRED for a Certificate of Status City / State / Zip A City / State / Zip PALM BEACH GARDENS FL	
D VANCIL, GENE 2225 MONET ROAD 1/380 W. Teach Rd PALM BEACH GARDENS FL 1/380 W. Teach Rd P.B. CARdens FC D BUD FARROW 11380 W. Teach Rd P.B. CARdens FC	
8. Name and Address of Current Registered Agent	1 0 0 0 2 3 4 3 7 0 1 - 4 - 11/10/97 91177 - 010 *****165.00
Name CENE SPASUE // 1665 PALM SEACH LAKES BLVD. Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City 13 CARDENS State FL 334/6 10. 1, 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 Subject Date Oct. 27, 1997 11. This corporation owes or has paid 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 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. SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER	R OR DIRECTOR* Date Daytime Phone #

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Kart-Kleener, Inc.



11380 West Teach Road/Palm Beach Gardens, FL 33410/(561) 775-0767

October 27,1997

Division of Corporations Annual Report-Reinstatement Section P.O. Box 6327 Tallahassee, F1.

Dear Sir:

The annual corporate report was filled out by Gene BRaswell and John Boyer, CPA. It was mailed on March 4,1997. Also included was a check which was numbered 576. It was made out for the amount of \$165.00. As of this date that check has not been returned in our bank statements.

ENclosed please find another check and the other materials per instructions of the reinstatement division.

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Gene BRaswell

Yours truly,