

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 NOV 15 PM 5:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # V47688

1. Corporation Name

CARPET CLEANERS PLUS, INC.

Principal Place of Business

1021 SE 8TH TERR  
STE. 4A  
CAPE CORAL FL 33990  
US

Mailing Address

1021 SE 8TH TERR  
STE. 4A  
CAPE CORAL FL 33990  
US

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

07/02/1992

5. FEI Number

65-0353316

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
PSD	VAN CLEVE, JEFFREY B	1021 SE 8TH TERR #4A	CAPE CORAL FL

800009019938

11/15/02--01031--013 \*\*150.00

8. Name and Address of Current Registered Agent

VAN CLEVE, JEFFREY B  
1021 SE 8TH TERR #4A  
CAPE CORAL FL 33990

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 REQUIRED  
REGISTERED AGENT MUST SIGN

Date

10/25/02

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 REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/25/02

CR2ED40 (8/02)



**Cossentino & Orlando**

Accountants  
1402 Cape Coral Parkway  
Cape Coral, Florida 33904  
(941) 945-4939  
Fax (941) 945-4938

October 28, 2002

Florida Department of State  
Division of Corporation  
P.O. Box 1500  
Tallahassee, FL 32302-1500

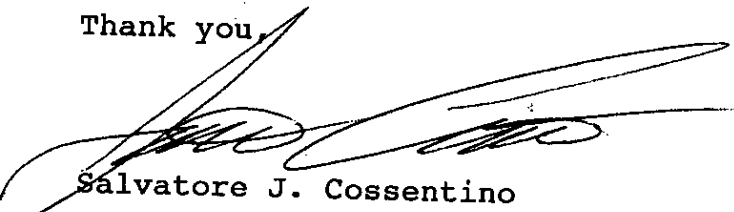
RE: Carpet Cleaners Plus, Inc.  
#V47688

To Whom It May Concern,

I am the accountant for the above mentioned client. In March of 2002, we contacted the Department of State because my client did not receive his annual filing report. For some reason, his annual report was sent back, and we are not sure why, since the address was correct when we called Tallahassee. They said they would send another blank form immediately, before the May 1st due date. In late April of 2002, we again called and informed the Department of State that we have not received the blank form. We finally received this form on October 21st, after another phone call was made. We complained to the Department of State, that because of their error, we did not feel that we were liable for the \$550.00 fee. They advised us that we should send in this letter explaining the circumstances, and that the \$150.00 fee would be accepted.

If you should have any questions, please feel free to contact me.

Thank you,



Salvatore J. Cossentino