PLEASE READ A	OMPLETING THIS FORM.							
REINS AT MENT	•	A DEPARTME Sandra B. Mo Secretary of S VISION OF CORPO	State)	FILEU	[M 0		
DOCUMENT# V6037		VISION OF CONT.	TATIONS .	98 N	OV 30 PM 2:	55		
1. Corporation Name				SECRETARY OF STATE TALLAHASSEE, FLORIDA				
BO-PEEPS CLEANING, INC.	المادا	73 17 W. C.	Seef 1					
Principal Place of Business	255		r 1885 b W11811	D BLIST WWYNE 1995; all DISC 2004; all	814 B1811 44811 81811 41811 41811 1811			
102 DRENNER RD. C-5	R RD. SO.	i						
ORLANDO FL 32806 US	32806							
If above addresses are incorrect in any way, line throto. 2. New Principal Office Address, If Applicable		nformation and enter ng Office Address, If						
Suite, Apt. #, etc.	5. Chick		Date Incorporated or Qualified To Do Business in Florida 08/26/1992					
ORIANDO +1.	Suite, Apt. #, OR LAn City & State			5. FEI Number Applied Fo				
	Count	√	59-3146688 Not Applicable 6. \$8.75 Additional Fee requir					
	3783 _{Sib} 3783		RAnge		OF STATUS DESIRED	for a Certificate of Status		
7. Names and Street Addresses of Each Officer and/o	r Director (Flo	Str	eet Address of Each					
Title(s) and/or Directors 2	3 (Do NOT Us	ficer and/or Director e Post Office Box Nu	combers) 4 City / State / Zip					
PD YENSEL, PATRICK	8626 VESTA TEI 8658	RRACE	ORLANDO FL					
¥ √ P YENSEL, MARY	8626 VESTA TEI 8658	RRACE	ORLANDO FL					
			8 ERSKINE DR. ORLANDO FL					
			9000027039495 -12/04/9801111021 ****158.75 ****158.75					
		1:						
8. Name and Address of Current Re	egistered Age	Name	9. Name and Address of New Registered Agent					
YENSEL, PATRICK	Street Address (P.	s (P.O. Box Number is Not Acceptable)						
8658 VESTA TERRACE ORLANDO FL 32825	Suite, Apt. #, Etc.							
City State 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.								
Registered Agent	Date 11-19-98							
11. This corporation owes or har Intangible Personal Property	s paid th		ar Yes	No 🗆	off of the state o	ter side for information intangible tax.)		
12. I certify that I am an officer or director or the receive this reinstatement application, the reason for dissolution owed by the corporation have been paid and the nation this application is true and accurate, and my sign	ition has been imes of individi	eliminated, the corpo ⊔als listed on thi <u>s fo</u> r	orate name satisfies t m do not qualify for a	he requirements an exemption und	of section 607.0401 or 6	617.0401, F.S., that all fees		
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #								

70FL

11/19/98

Bo-Peep's Inc. Vendor QuickReport January through December 1998

Type DIVISION OF CORPORATIO Bill Prest - Check	Date N 4/15/98	Num 6623	Мещо	Account	<u>Cir</u>	Accounts P	 Russer grand to	-150.00
		<i></i>	i -1 00	ω/i	-)9	3 <i>Q</i>) one	-

ck was sent er 4/15/98 along w/ report. was never returned to my address. Please snd verfrontier of recesst

thank you Precipent