

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

**DOCUMENT # P03000109342**

1. Entity Name  
FINE LINE CONSTRUCTION COMPANY, INC.



**FILED**

**09 JAN -9 PM 2:58**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

Principal Place of Business: 6319 35TH AVE CIR E. PALMETTO, FL 34221 US  
Mailing Address: 6319 35TH AVE CIR E. PALMETTO, FL 34221 US

2. Principal Place of Business - No P.O. Box #  
Suite, Apt. #, etc.

3. Mailing Address  
3119 61st St E  
Suite, Apt #, etc.

City & State: Palmetto FL

Zip: 34221 Country: U.S.A



11182008 REIN-P CR2E098 (1/07)

4. FEI Number: 20-0276719 Applied For: Not Applicable

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
DONATO, REBECCA  
6319 35TH AVE CIR E.  
PALMETTO, FL 34221

7. Name and Address of New Registered Agent  
Name:  
Street Address (P.O. Box Number is Not Acceptable):  
City: FL Zip Code:

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  
SIGNATURE: Rebecca A. Donato DATE: 1-7-09  
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$750.00  
After January 1, 2009, Fee will be \$900.00**

10. OFFICERS AND DIRECTORS	
TITLE	P <input type="checkbox"/> Delete
NAME	DONATO, REBECCA
STREET ADDRESS	6319 35TH AVE CIR E.
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	V <input type="checkbox"/> Delete
NAME	DONATO, MARK
STREET ADDRESS	6319 35TH AVE CIR E.
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	600140187116
STREET ADDRESS	01/09/09--01038--007 **900.00
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rebecca A. Donato Rebecca A. Donato DATE: 1-7-09 DAYTIME PHONE #: 809-1620  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR