

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # F9800002722

1. Entity Name
KINDORF ENTERPRISES, INC.



Principal Place of Business
1650 SAND LAKE RD
ORLANDO, FL 32809

Mailing Address
1650 SAND LAKE RD
ORLANDO, FL 32809

2. Principal Place of Business - No P.O. Box #
7101 PRESIDENTS DR.

Suite, Apt. #, etc.
205

3. Mailing Address
7101 PRESIDENTS DR.

Suite, Apt. #, etc.
103

City & State
ORLANDO, FL

City & State
ORLANDO, FL

Zip
32809

Country
USA

Zip
32809

Country
USA

12/19/07 REINSTATEMENT CR2E09844#07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT

4. FEI Number
59-3492995

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KINDORF, ROBERT E
3216 WEST ORANGE COUNTRY CLUB DR.
WINTER GARDEN, FL 34787

Name
ROBERT E. KINDORF

Street Address (P.O. Box Number is Not Acceptable)

7101 PRESIDENTS DR.

#205

City
ORLANDO Zip Code
FL 32809

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

Robert Kindorf

12-19-07

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2008, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

True

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP <input type="checkbox"/> Delete KINDORF, ROBERT E 3216 WEST ORANGE COUNTRY CLUB DR. WINTER GARDEN, FL 34787	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addit 500113335775 12/21/07-01009-009 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP <input type="checkbox"/> Delete <i>KINDORF, ROBERT E. 7101 PRESIDENTS DR. #205 ORLANDO, FL 32809</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addit
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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert Kindorf

5. Mailed DEC 21 2007