

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

99 NOV -3 PM 3:43

DOCUMENT # H03227

1. Corporation Name

REDLINE CORPORATION

Principal Place of Business

8750 SE 70 TERR.
 OCALA FL 32672

Mailing Address

8750 SE 70 TERR.
 OCALA FL 32672

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

05/11/1984

5. FEI Number

59-2926382

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$9.75 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
PDV	KUMLER, DANIEL	8750 SE 70 TERR. BOX 9	OCALA FL

588883839955-9
 -11/09/99-01074-006
 ****150.00 ****150.00

Handwritten signature/initials

8. Name and Address of Current Registered Agent

KUMLER, DANIEL F.
 8750 S.E. 70TH TERRACE
 OCALA FL 32672

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.

Signature of Registered Agent

Handwritten signature of Daniel F. Kumer

REGISTERED AGENT MUST SIGN

Date

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Redline Inc.

8750 SE 70th Terrace
Ocala, FL 34472-3410
USA

Phone 352-245-1814
Fax 352-347-7459

October 25, 1999

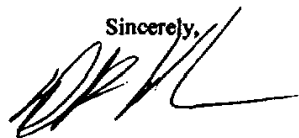
Division of Corporations
Annual Report/Reinstatement Section
PO Box 6327
Tallahassee, FL 32314-6327

Dear Sirs & Madams,

After receiving a notice of revocation from your office, I checked the corporation's records. I found that check # 5248, which was mailed to your department on April 22, 1999, had never cleared through our bank. I called your department and was advised by your staff that the check had been received, but was unsigned. I pointed out that the check had not been returned to the corporation. I was advised by your department to reissue the check in the amount of 150.00 dollars and submit with the enclosed form. Please find both enclosed.

I appreciate your consideration in assisting to rectify this matter.

Sincerely,



Daniel Kumler

DK: jfm

Enc: 2
Account ID: Doc# HO3227 /
FEI # 59-2926382
cc: File