

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Kathleen Lewis  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P00000008009

1. Corporation Name

DYNAMIC EMBROIDERY, INC.

Principal Place of Business

Mailing Address

1225 BENNETT DRIVE, SUITE 132  
LONGWOOD FL 32750

1225 BENNETT DRIVE, SUITE 132  
LONGWOOD FL 32750

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

1275 BENNETT DRIVE

Suite, Apt. #, etc.

Suite 138

City & State

LONGWOOD, FLORIDA

Zip

32750

Country

USA

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

01/18/2000

5. FEI Number

59-3734655

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
President	MARIO ANGELINI	805 RAVEN CIRCLE APT. 205	ALTAMONTE SPRINGS FLORIDA 32714
Vice-P.	ELINA BAADE	210 MALLARD STREET	ALTAMONTE SPRINGS FLORIDA 32701
			400004733184--4 12/19/01-01061-007 ****150.00 ****150.00

8. Name and Address of Current Registered Agent

BAADE, ELINA

210 MALLARD STREET

ALTAMONTE SPRINGS FL 32701

9. Name and Address of New Registered Agent

Name

MARIO ANGELINI

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

805 RAVEN CIRCLE

Suite, Apt. #, Etc.

APT. 205

City

ALTAMONTE SPRINGS

State

FL

Zip Code

32714

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

REGISTERED AGENT MUST SIGN

Date 10-27-2001

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 #

10-27-2001 407-716-7654

**DYNAMIC EMBROIDERY**

1275 Bennett Drive  
Suite 138  
Longwood, FL 32750  
Phone (407) 716-7654  
Fax (407) 339-7926  
angelini55@aol.com

October 29, 2001

Dear Mr. Yarbrough,

As per our conversation, I am enclosing a replacement check for the 2001 uniform business report. Please note that the correct address of the corporation is 1275 Bennett drive, suite 138, Longwood, Florida 32750.

I believe having the erroneous address may have caused a lot of the delays. Thank you for taking care of this matter personally.

Sincerely,



Mario Angelini  
President

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