

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P01000080650

1. Corporation Name

Majestic Leasing Corporation

FILED

04 FEB 27 AM 11:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

400028408054

02/09/04--01036--019 \*\*450.00

**REINSTATEMENT 02-04**

2. Principal Office Address

169 Steeple Chase Cir

Suite, Apt. #, etc.

City & State

Sanford FL

Zip

32771

Country

USA

3. Mailing Office Address

Majestic Leasing Corp

Suite, Apt. #, etc.

P.O. Box 471006

City & State

Lake Monroe, FL

Zip

32747

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

59-3739757

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

LIHQA Felgenhauer

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

169 Steeple Chase Cir

Suite, Apt. #, Etc.

City

Sanford

State

FL

Zip Code

32771

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

*[Signature]*

REGISTERED AGENT MUST SIGN

Date

1/29/04

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Kevin Felgenhauer II	169 Steeple Chase Cir	Sanford, FL 32771
V.	Michael Weimer	5055 EAST Alpine	Altamonte Springs FL 32711

10. 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

1-29-04

Daytime Phone #

407383-6561

January 26, 2004

Florida Department of State  
Corporation Reinstatement

Dear Sirs:

As per my Conversation with one of your agents, my Bank called me today concerning the inactive status of Majestic Leasing Corporation. We had moved and never received the Reinstatement Form. It went to 717 Monroe Road, Lake Monroe Fl 32747

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Our Address is 169 Steeple Chase Cir, Sanford, Fl. 32771

I'm sending you the 450.00 for Reinstatement.

If you should have any questions, please call me. (321) 377- 1886

Sincerely,

Linda Felgenhauer /*Sec.*

*Our mailing address:*

*P.O. Box 471006  
Lake Monroe, Fl. 32747*

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