

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

03 MAY 23 PM 2:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000086348

**1. Corporation Name**

RED DOT U.S.A., INC.

**2. Principal Office Address**

11769 PEACHSTONE LANE

Suite, Apt. #, etc.

City & State

ORLANDO, FLORIDA

Zip

32821

Country

U.S.A.

**3. Mailing Office Address**

11769 PEACHSTONE LANE

Suite, Apt. #, etc.

City & State

ORLANDO, FLORIDA

Zip

32821

Country

U.S.A.

**4. Date Incorporated or Qualified  
To Do Business in Florida**

AUGUST 30, 2001

**5. FEI Number**

59-3743282

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

LEON KIRTON

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

11769 PEACHSTONE LANE

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32821

**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

REGISTERED AGENT MUST SIGN

Date

**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	LEON KIRTON	11769 PEACHSTONE LANE	ORLANDO, FL 32821
V	CHERIE D. KIRTON	11769 PEACHSTONE LANE	ORLANDO, FL 32821

**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:

LEON KIRTON

407-238-0999

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)

May 7, 2003

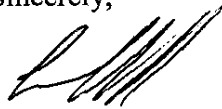
Department of State  
Division of Corporations  
409 East Gaines St.  
Tallahassee, FL 32399

To Whom It May Concern:

We are remitting with the enclosed Corporation Reinstatement Form a check in the amount of \$308.75, representing the filing fees due for 2002 & 2003 of \$150.00 each year and \$8.75 for a Certificate of Status.

Please abate all late filing penalties, as we never received the 2002 Uniform Business Report (UBR) from your department and were not aware of administrative dissolution until examining the Division of Corporations website.

Sincerely,

A handwritten signature in black ink, appearing to read 'Leon Kirton', with a stylized, sweeping flourish at the end.

Leon Kirton  
President  
Red Dot, U.S.A., Inc.