

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1082

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

07 JAN 29 AM 9:58

FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

300087202833  
02/05/07--01003--014 \*\*291.25

DOCUMENT # P02000054960

1. Corporation Name Richter Engineering, Inc

2. Principal Office Address

2007 W. Reynolds St.

Suite, Apt. #, etc.

Suite C

City & State

Plant City FL

Zip

33563

Country

Hillsborough

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Zip

Country

**REINSTATEMENT 03-07**

CR2E081 (12/05)

4. Date Incorporated or Qualified  
To Do Business in Florida

May 20, 2002

5. FEI Number

62-0620179

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

Mark V. Richter

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

2007 W. Reynolds St

Suite, Apt. #, Etc.

Suite C

City

Plant City

State

FL

Zip Code

33563

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 12/20/06

**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
<u>Pres/VP</u>	<u>Kelly L. Richter</u>	<u>2007 W. Reynolds St</u>	<u>PC FL 33563</u>
<u>Treas</u>	<u>Mark V. Richter</u>	<u>2007 W. Reynolds St</u>	<u>PC FL 33563</u>

300082739783  
12/22/06--01026--007 \*\*458.75

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 contained in Chapter 119, 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

12/20/06  
Date

813 500 0362  
Daytime Phone #

RICHTER ENGINEERING, INC.

2072

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

January 24, 2007

RE: Corporation Reinstatement

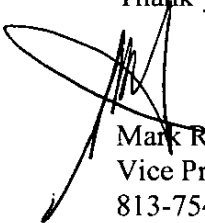
To Whom It May Concern:

In 2003 we never received the notice for the annual report. Consequently, we never received the first or second dissolution notices either.

For this reason we are asking for the Reinstatement Fee of \$600 to be waived.

Enclosed is a check for the balance of the fees due.

Thank you for your attention.



Mark Richter  
Vice President  
813-754-8148