

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

99 APR 15 PM 12:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



REINSTATEMENT

98-99  
100  
4/15/99

DOCUMENT # P97000104709

1. Corporation Name  
TREADSTONE OVERSEAS MARKETING, INC.

Principal Place of Business		Mailing Address	
842 DIPLOMAT DRIVE BUILDING "D"/UNIT 101 DEBARY FL 32713		<del>842 DIPLOMAT DRIVE</del> <del>BUILDING "D"/UNIT 101</del> <del>DEBARY FL 32713</del>	
If above addresses are incorrect in any way, line through incorrect information and enter correct below.			
2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc. POST OFFICE BOX 6341	
City & State		City & State DELTONA, FL. 32728	
Zip	Country	Zip	Country
		32728-6341	U.S.A.

4. Date Incorporated or Qualified To Do Business in Florida  
12/11/1997

5. FEI Number  
59-352-9963

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
<del>PST</del>	<del>BISCHOFF, MANFRED</del>	<del>842 DIPLOMAT DRIVE</del>	<del>DEBARY, FL. 32713</del>
<del>OFF</del>	<del>BISCHOFF, MANFRED</del>	<del>842 DIPLOMAT DRIVE</del>	<del>DEBARY, FL. 32713</del>
PTD	HANSPETER BRUENIG	842 DIPLOMAT DRIVE/#101	DEBARY, FL. 32713
CSD	MANFRED BISCHOFF	842 DIPLOMAT DRIVE/#101	DEBARY, FL. #32713
VD	EDWARD JACOBSON	385 S. NORTHLAKE BLVD. #2036	ALTAMONTE SPRINGS, FL. 32761

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
<del>WENNER MARK BERT</del> <del>100 N. TAMPA ST. SUITE 3320</del> <del>TAMPA FL 33602</del>	Name EDWARD JACOBSON Street Address (P.O. Box Number is Not Acceptable) 385 SOUTH NORTHLAKE BLVD. Suite, Apt. #, Etc. SUITE #2036 City ALTAMONTE SPRINGS, State FL Zip Code 32701

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: Edward Jacobson (Date: 3/11/99)  
REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes  No  (See other side for information on intangible tax.)

12. 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)(j), 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: Hanspeter Bruenig HANSPETER BRUENIG 3/17/99 407-595  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR22040 (9/98)