

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JUN -9 PM 1:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PO1000082818

1. Corporation Name

Pete's Performance Center, Inc.

2. Principal Office Address

1730 Fern Palm Dr.

Suite, Apt. #, etc.

Unit G

City & State

Edgewater, FL

Zip

32132

Country

USA

3. Mailing Office Address

1730 Fern Palm Dr.

Suite, Apt. #, etc.

Unit G

City & State

Edgewater, FL

Zip

32132

Country

USA

REINSTATEMENT 03-04

4. Date Incorporated or Qualified
To Do Business in Florida

8/16/2001

5. FEI Number

59 373 873 7

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$6.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Deborah Zorge

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

1730 Fern Palm Dr

Suite, Apt. #, Etc.

Unit G

City

Edgewater

State

FL

Zip Code

32132

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

Deborah Zorge

REGISTERED AGENT MUST SIGN

Date

6/4/04

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.T	Deborah Zorge	732 S. Glencoe Rd	New Smyrna Bch, FL 32148
V	Peter Zorge	732 S. Glencoe Rd	New Smyrna Bch, FL 32148

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:

Deborah Zorge Pres

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6/4/04

Daytime Phone #

386 409-3507

CR2001 (01/04)

**Pete's
Performance
Center, Inc.**

911 South Dixie Freeway
New Smyrna Beach, FL 32168
386-409-3507

June 5, 2004

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

Subject: Document Number P01000082818; Corporation Reinstatement

To Whom It May Concern:

The reason for this letter is to respectfully request that you waive the reinstatement fee for Pete's Performance Center, Inc.

I recently learned that our corporation was considered "inactive" as of September 2003, due to our annual report not being filed. I found out accidentally when I went to apply for my City of Edgewater Occupational License, (we are moving the business; as of July 1, 2004 the new address will be 1730 Fern Palm Drive, Unit G, Edgewater, FL 32132).

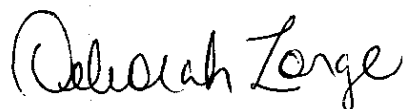
When we incorporated, August of 2001, we consulted an attorney to be sure that everything was filed properly. I was under the mistaken impression that she would continue to take care of any necessary paperwork, notify me of anything I needed to submit etc. (For a fee, of course). The 2002 report was filed properly. Well, needless to say, she did not do so for 2003, & I was unaware that I needed to. I was told that notification was mailed to me by the State, but I did not receive it. While on line checking the status of Pete's Performance I noticed that the address listed is 911 Ridgewood Av, New Smyrna Beach. Our street address is 911 South Dixie Freeway, New Smyrna Beach. Ridgewood Av & South Dixie Freeway are one and the same road, but at different areas the name changes. I have had no problem receiving my mail however that may have caused some confusion.

Again, I respectfully request the reinstatement fee be waived at this time. I am now aware that it is solely my responsibility to file and I assure you, I will do so!

Enclosed is a Corporation Reinstatement form, as well as a check for three hundred eight dollars and seventy-five cents, payment for years 2003, 2004 and a certificate of status. I may be reached at 386-409-3507 during the day if you need to contact me for any reason. I appreciate your time & consideration concerning this matter.

Thank you.

Sincerely,



Deborah Zorge, Pres