PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State DIVISION OF CORPORATIONS

P02000097028 DOCUMENT

1. Corporation Name

SACRED SPACE, INC.

Principal Place of Business

Mailing Address

2134 44TH STREET SOUTH ST. PETERSBURG FL 33711 2134 44TH STREET SOUTH ST. PETERSBURG FL 33711

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

New Principal O	ffice Address, If Applicable	3. New Mailing Office	New Mailing Office Address, If Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			
City & State		City & State				
Zip	Country	Zip	Country			

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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	-			
Date Incorporated or Qualified To Do Business in Florida 09/09/2002				
5. FEI Number	Applied For			
'30-0112639	Not Applicable			

\$8.75 Additional Fee required CERTIFICATE OF STATUS DESIRED for a Certificate of Status

7. Names	and Street Addresses of Each Officer and/or Director (Flo	orida nonprofit corpora	tions must list at least 3 dire	ectors)		
Titie(s)	Name of Officers and/or Directors		eet Address of Each cer and/or Director	4	City / State / Zip	
PD	LENAS, MICHAEL	430 13TH AVENU	E NORTH	ST. PETERSBI	JRG FL 33701	
		-	-			
	8. Name and Address of Current Registered Age	ent	9. Na	ame and Address of New I	Registered Agent	

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

Suite, Apt. #, Etc.

City

Zip Code State

10. I, being appointed the regist red agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent

LENAS, MICHAEL

2134 44TH STREET SOUTH

ST. PETERSBURG FL 33711

EGISTERED AGENT MUST SIGN

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11. 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 acqurate, 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

Sacred Space, Inc. 2134 44th Street South St. Petersburg, FL 33711

October 20, 2003

Florida Department of State Division of Corporations Annual Report/Reinstatement Section P.O. Box 6327 Tallahassee, FL.32314-6327

Re: Annual Report filing and Reinstatement for Sacred Space, Inc.

Dear Sir or Madam:

Please find enclosed our Application for Reinstatement for Sacred Space, Inc. and our filing fee of \$150.00. We would like to request at this time, a waiver of the penalties assessed for failure to file our corporation annual report/uniform business report based on the following circumstances.

Sacred Space, Inc. never received your previous two notices requesting us to file our corporation annual report/uniform business report. The address your office has on file is correct, however we never received either report. We have had, from time to time, problems receiving our mail. Our business is located in a neighborhood and we believe that sometimes our mail is either mis-delievered to an address next door or our mail has been improperly removed from our mailbox before we have a chance to retrieve it. We have had other filings and mail that was sent to us turn up missing and never received on our end. This is not the first time this has happened. Also, we had a break-in where some blank checks were stolen along with some of our mail. It's possible that the corporation annual report/uniform business reports were stolen along with the checks and other items that have turned up missing. We believe we have made the necessary changes to correct the problems we are having with receiving our mail. We have discussed our situation with our local post man and seem to be receiving our mail lately without any problems. We hope this has not created a problem for your office and foresee all future annual reports being filed on a timely basis.

Based on the circumstances referred to above, we respectfully request a waiver of the reinstatement penalties and ask that your office accept our filing fee and application for reinstatement. If you have any questions or require additional information, please feel free to contact us. /

Sincerely.

Michael Lenas President Sacred Space, Inc.