DI EASE BEAD	ALL INICTOLICTIONS	BEEODE O	OMPLETING THIS FORM.
APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTME Sandra B. Mo Secretary of	NT OF STATE rtham State	APPROVED AND FILED
DOCUMENT # P9300	20797725	MATIONS	1997 AUG 13 111 11:33
1. Corporation Name			SECRETARY OF STATE TALLAHASSEE, FLORIDA
ZAAK INVESTMENT	INC		MEDMINGSEL, FLUIGHA
Principal Place of Business	Mailing Address		
	1900 ALOMA	Ave.	
	1900 Aloma White Park, PI	_ 31792	
If above addresses are incorrect in any way, line thro  2. New Principal Office Address, If Applicable	ough incorrect information and enter correction below.  3. New Mailing Office Address, If Applicable		Date Incorporated or Qualified
Suite, Apt. #, etc.	Suite, Apt. #, etc.		To Do Business in Florida
City & State	City & State		5. FEI Number Applied For Not Applicable
Zip Country	Zıp Count	ry	6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fcc required for a Certificate of Status
7. Names and Street Addresses of Each Officer and/	I I or Director (Florida nonprofit corpor	ations must list at leas	et 3 directors)
Title(s) and/or Directors Office		reet Address of Each fficer and/or Director Jse Post Office Box Nu	umbers) City / State / Zip
P. Aziz.M. Joma	1 1900 41 11	ng Aue	200002268222-1
			-08/15/9701044006 ****573.75 ****573.75
			2/60/197
		,	81,31
8. Name and Address of Current F	legistered Agent		Name and Address of New Registered Agent
Aziz.M. Janal			962
Alma Mara Aug with a box			D. Box Number is Not Acceptable)
Surie, Apr. #, El		Suite, Apt. #, Etc.	0
40. I haire annulated the arrivate and accept of the leave	32792.	City	State Zip Code
10. I, being appointed the registered agent of the above Signature of Registered Agent	е патео согрогацоп, ат татшаг w	ith and accept the obli	gations of Section 607.0505, F.S.
Registered AgentRE	GISTERED AGENT MUST SIGN		Date
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No 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)(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: Cym			
SIGNATURE: Date Daytime Phone #			

## Untitled



## TO WHOM IT MAY CONCERN

Dear sir/madam

I am writing you this lettet for not to penelize me for renewing my corporation, The reason I would like the penelty waived, because I did not receive the notice and was not told and was not aware of the penelty, Furthermore the penelty would be very burden and difficult for my small business. consideration to this matter would be greatly appriated.

Thangking you

Zaak investments Inc Aloma exxon shop 1900 aloma avenue Winter park Fl 32792