

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JUN -3 PM 2:37

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **P98000039110**

1. Corporation Name

ZERO GRAVITY, INC.

Principal Place of Business

Mailing Address

8102 W KNIGHTS GRIFFIN RD
PLANT CITY FL 33565

8102 W KNIGHTS GRIFFIN RD
PLANT CITY FL 33565

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/20/1998

5. FEI Number

65-0828833

Applied For

Not Applicable

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	PERICH, DAVID	8102 W KNIGHTS GRIFFIN RD	PLANT CITY FL 33565

600037425036
05/28/04--01030--004 **300.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PERICH, DAVID
8102 W KNIGHTS GRIFFIN RD
PLANT CITY FL 33565

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

5-26-04

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 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

Date

5-26-04

Daytime Phone #

CR2E040 (7/03)

ROSA E. BOWEN
Certified Public Accountant
1202 West Linebaugh Avenue, Suite C
Tampa, Florida 33612
(813) 932- 6733, fax (813) 932-1293

May 18, 2004

Division of Corporations
Annual Report/Reinstatement Section
PO Box 6327
Tallahassee, FL 32314-6327

Re: Abatement of penalties
Zero Gravity Inc., 65-0828833

Dear Sirs:

I am writing to request an abatement of penalties for delinquent filing the corporate annual report. The only reason there can possibly be for not filing on a timely basis is that my client never received the Annual Report to file.

Enclosed are a \$300 check that represents the fees for the annual report, \$150 per each year delinquent, 2003 and 2004, and the Application for Reinstatement. We are at the mercy of the State to grant the request. The Annual Report is a simple report requiring only signatures if there are no changes in the corporate structure, shareholders or registered agent. As you can see, there are no changes. The only reason it was not filed is because it was never received.

We respectfully request that the abatement be granted to Zero Gravity Inc. A request for abatement for the sister company, Perich Studios, Inc. is also being requested as well.

Sincerely yours,


Rosa E. Bowen

Encl.