

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sand J. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000005194

1. Corporation Name

U.S. ENERGY, INC.

98 FEB -5 AM 10:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Principal Place of Business

4821 ATLANTIC BLVD.
JACKSONVILLE FL 32207

Mailing Address

4821 ATLANTIC BLVD.
JACKSONVILLE FL 32207



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

REINSTATEMENT 97-98

2. New Principal Office Address, If Applicable

2305 BEACH BLVD.
SUITE 105

3. New Mailing Office Address, If Applicable

1015 ATLANTIC BLVD.
SUITE, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

10/07/1996

5. FEI Number

☒ 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)

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
	LEWIS, WILLIAM R N/A	4821 ATLANTIC BLVD N/A	JACKSONVILLE, FL 32207 N/A
PT	GAPE, TERRENCE R	42578 CHANCERY HOUSE - PO BOX F	FREEPORT, GRAND BAHAMAS
S	FERGUSON, STEPHANIE	42578 CHANCERY HOUSE - PO BOX F	FREEPORT, GRAND BAHAMAS
			400002344474--4 -02/05/98--01033--001 ****865.00 ****865.00
			400002344474--4 -11/12/97--01049--014 *****70.00 *****70.00

8. Name and Address of Current Registered Agent

LEWIS, WILLIAM R
4821 ATLANTIC BLVD.
JACKSONVILLE FL 32207

9. Name and Address of New Registered Agent

Name William A. DiATRUCCHI, JR.
Street Address (P.O. Box Number is Not Acceptable)
2305 BEACH BLVD.
Suite, Apt. #, Etc.
SUITE 105
City JACKSONVILLE, BEACH State FL Zip Code 32250

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

William A. DiATRUCCHI, JR.

REGISTERED AGENT MUST SIGN

Date 11/25/97

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)(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

12/10/97

Date

242-352-8134

Daytime Phone #

CR2E040 (8/97)