## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FILED SECRETARY OF STATE 'TALLAHASSEE, FLORIDA FLORIDA DEPARTMENT OF STATE **Katherine Harris**

**APPLICATION** FOR REINSTATEMENT

Secretary of State

DIVISION OF CORPORATIONS

**DOCUMENT #** 

H13927 1. Corporation Name

INTERNATIONAL PETROLEUM CORPORATION

Principal Place of Business

Mailing Address

700 S. ROYAL POINCIANA BLVD. STE. 800

MIAMI SPRINGS FL 33166

700 S. ROYAL POINCIANA BLVD.

MIAMI SPRINGS FL 33166

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REINSTATEMENT 8

if above addresses are incorrect in any may, the through moon or information and onto the control of the contro								
			ing Office Address, If Applicable  Alexander 5+ree+ , etc.		4. Date Incorporated or Qualified To Do Business in Florida 07/20/1984			
للمستخدد المنافع المناف					5. FEI Number	ه يو ، مسيدرونيو	Applied For	
City Stage City F/ City Stage			City, Fl Country		<u> </u>	59-2459425	Not Applicable	
Zip 33566 Country Zip 3366					6. CERTIFICATE OF STATUS DESIRED to 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)	Title(s) Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip			
PDJP	ALLEN, GARRY Harry Habets		195 S. ALEXANDER ST. 1490/ QUOTUM DIVINE Ste 200			PLANT CITY FL. Dall95 TX 75254		
-	SHIBETTI, FRANK B) // W. Solomon		14901 Quorum Doire Ste 200			PLANT CITY FL. Jally 5, TX 75254		
+ 5	SHINSKEY, DALE Dan Self		105 S. ALEXANDER ST. 1990   Quorum Drive Ste 200			PLANT CITY ET. 75254		
8	<del>DIAZ, ISABEL</del>		700 S ROYAL POINCIANA BLVD		MIAMI-SPRINGS FL->			
- <b>VP</b>	MELLONE, RICHARD		7 <del>00 S ROYAL POINCIANA BLV</del> D		MIAMI SPRINGS FL 33168			
						<del>10004690</del> -11/20/010 ***1500.00		
8. Name and Address of Current Registered Agent					Name and Address of New Registered Agent			
NRAI SERVICES, INC. 526 EAST PARK AVENUE TALLAHASSEE FL 32301				Name T GO System  Street Address (P.O. Box Number)'s Not Acceptable) To 1200 S. Vine Island  Suite, Apt. #, Etc.				
							77. 0.4.	

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 filling 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:

Dan Setf - Secretary 9/13/01 (972) 758-6025
Director Date Date Date

10-15-01