

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 APR -4 AM 9:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K29705

1 Corporation Name

Castleguard Energy, Inc.

Principal Place of Business

Mailing Address

4625 Greenville Avenue, Ste. 203
Dallas, TX 75206

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

2. New Principal Office Address, If Applicable
4625 Greenville Ave.,

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.
Ste. 203

Suite, Apt. #, etc.

City & State
Dallas, TX

City & State

Zip
75206

Country
USA

Zip
Country

REINSTATEMENT

99-00

4. Date Incorporated or Qualified To Do Business in Florida
07/22/88

5. FEI Number

Applied For
 Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$5.75 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
Pres	Bob Honea	4625 Greenville Ave. #203	Dallas, TX 75206
Sec	Bob Honea	4625 Greenville Ave. #203	Dallas, TX 75206
Treas	Bob Honea	4625 Greenville Ave. #203	Dallas, TX 75206
			700003207987--E -04/13/00--01111--025 ****900.00 ****900.00
			700003207987--E -04/13/00 01111--025 *****17.50 *****17.50

8. Name and Address of Current Registered Agent

Marc A. Kuperman
7695 S.W. 104 Street, Ste. 210
Miami, Florida 33156

9. Name and Address of New Registered Agent

Name
Paracorp Incorporated
Street Address (P.O. Box Number is Not Acceptable)
236 East 6th Avenue
Suite, Apt. #, Etc.
City
Tallahassee
State
FL
Zip Code
32303

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

Denise Zoller

Assistant Secretary
REGISTERED AGENT MUST SIGN

Date

4/3/00

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:

Bob Honea

Bob Honea, President

03/31/00

(214) 691-2230

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

KE