


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>CORPORATION REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT # P00000084869</b>			
1. Corporation Name <b>Atlas Petroleum Corporation</b>			
2. Principal Office Address <b>5725 S.W. 57th Terrace</b>		3. Mailing Office Address <b>5725 S.W. 57th Terrace</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <b>Miami, Florida</b>		City & State <b>Miami, Florida</b>	
Zip <b>33143</b>	Country <b>U.S.A.</b>	Zip <b>33143</b>	Country <b>U.S.A.</b>

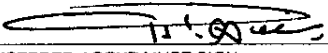
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**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**REINSTATEMENT 02-09**

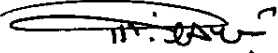
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**02/26/04--01004--018 \*\*1058.79**

4. Date Incorporated or Qualified To Do Business in Florida <b>09/05/2000</b>	
5. FEI Number <b>65-1098202</b>	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

<b>7. Name and Address of Current Registered Agent</b>		
Name <b>Georges Ph. Riesen</b>		
Street Address (P.O. Box Number is Not Acceptable) <b>5725 S.W. 57th Terrace</b>		
Suite, Apt. #, Etc.		
City <b>Miami</b>	State <b>FL</b>	Zip Code <b>33143</b>

<b>8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.</b>	
Signature of Registered Agent  <b>REGISTERED AGENT MUST SIGN</b>	Date <b>01/14/2004</b>

<b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b>			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P, D	Marcel D. Theisen	33, Mont-a-Lumet	1370, Zetrud-Lumay, Belgium
T	Martin T. Pettit	13499 Biscayne Boulevard #804	North Miami, Florida 33181
S, D	Clark Kennedy	1100 Nasa Road 1, Suite 404	Houston, Texas 77058
D	Georges Ph. Riesen	5725 S.W. 57th Terrace	Miami, Florida 33143
D	Marcel Aribert	13499 Biscayne Boulevard #804	North Miami, Florida 33181

<b>10. 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.</b>	
<b>SIGNATURE:</b>  <b>GEORGES PH. RIESEN</b>	<b>01/14/2004 (305) 667-7787</b>
<b>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</b>	<b>Date Daytime Phone #</b>

CR2E081 (10/02)