PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE CORPORATION 05 MAY 24 AM 10: 15 Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS LECKETARY OF STATE ALLAHASSEE, FLORIDA DOCUMENT # 1010000 89188 1. Corporation Name Petroleum Retailers corporation 757 N.W 27th AVE SUITE 204 MiaminFL 33125 2. Principal Office Address 3. Mailing Office Address 757 N.W 27th AVE 757 N.W. 27th AVE Suite, Apt. #, etc. Suite, Apt. #, etc. 204 4. Date Incorporated or Qualified 204 08-17-2001 To Do Business in Florida City & State City & State 5. FEI Number Miami, FL MiaminFL 4511 36731 Not Applicable Country Country 6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status 33125 33125 u-SA. U.S.A. 7. Name and Address of Current Registered Agent 300055989483 /10/05--01002--017 **45 Aguilar Richard Street Address (P.O. Box Number is Not Acceptable)
757 N.W. 27+h AVE Suite, Apt. #, Etc. 2D4 Zip Code MIami CR2E081 (01/05) 8. I, being appointed the registered agen amed corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S Signature of Registered Agent REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director City / State / Zlp fimental, Ruben N.W. 29+h AVE Miami, FL 33126 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PETROLEUM RETAILERS CORPORATION 757 NORTHWEST 27TH AVENUE, SUITE 204 MIAMI, FL 33125

May 6, 2005

Department of State
Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, Florida 32314

TAXPAYER: PETROLEUM RETAILERS CORPORATION

DOC. NO.: P01000081188

FORM: APPLICATION FOR REINSTATEMENT

PERIOD: 2003 TO 2005

Gentlemen / Mesdames:

I am writing to you regarding the penalties imposed as a result of the late filling of the 2003 to 2005 Uniform Business Report. Foremost, please note that it was not my willful neglect or intent to not timely pay and file the Corporate Annual Report but simply a result of the facts stated below.

During the middle of 2002 I moved business locations. As a result of the address change, I had all of my mail forwarded by the Post Office to the new address. During this change it seems that the original copy of the Report was never forwarded to the new address. It was not until this past week when I was contacted by my bank that I realized that the annual report was never filed. Therefore, please up-date your records accordingly to reflect the correct address as "757 Northwest 27th Avenue, Suite 204, Miami, FL 33125".

In light of the above facts, I respectfully request the abatement of all penalties. In addition, enclosed please find a check for \$450, which represents the annual fee for 2003 to 2005.

Please do not hesitate to contact me should you have any questions.

Sincerely,

Ruben Pimental, President

Enclosures

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