

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



**APPLICATION
FOR
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV -3 AM 9:29

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P02000004066

1. Corporation Name

BASCE, INC.

Principal Place of Business

Mailing Address

4328 CORPORATE SQ., SUITE C
NAPLES FL 34104

4328 CORPORATE SQ., SUITE C
NAPLES FL 34104



REINSTATEMENT 03

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

2. New Principal Office Address, If Applicable

11825 Collier Blvd

3. New Mailing Office Address, If Applicable

11825 Collier Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Naples Fl

City & State

Naples Fl.

Zip

34116

Country

USA

Zip

34116

Country

USA

4. Date Incorporated or Qualified To Do Business in Florida

01/09/2002

5. FEI Number

01-0570358

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	4 City / State / Zip
PRES	MARK R. EHRIE	4843 HAMPSHIRE CT #305	NAPLES, FL 34112
V PRES	BARBARA EHRIE	16925 BOUNDARY DR.	ASHLAND, MS 38603
TR.	MICHAEL EHRIE SR.	4843 HAMPSHIRE CT #305	NAPLES, FL 34112

800024376088
11/03/03--01036--005 **158.75

8. Name and Address of Current Registered Agent

PINTER, MICHAEL R ESQ.
4328 CORPORATE SQ., SUITE C
NAPLES FL 34104

9. Name and Address of New Registered Agent

Name *Michael R. Pinter, PA*
Street Address (P.O. Box Number is Not Acceptable)
4328 Corporate Sq
Suite, Apt., Etc. *Suite C*
City *Naples Fl* State *FL* Zip Code *34104*

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. or 617.0505, F.S.

Signature of Registered Agent

[Signature]
REGISTERED AGENT MUST SIGN

Date

10/31/03

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 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] MARK R. EHRIE PRES
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/31/03

CR2E040 (7/03)

bp



BASCE Inc.

Independent Dealer

Golden Gate BP
BP America Inc.
11825 Collier Blvd
Naples, FL 34116

Division of Corporations

Reinstatement Section

PO Box 6327

Tallahassee FL 32314

Direct 239 455 5754
Fax 239 455 8791
Mobile 239 293 9129

To Whom It May Concern

We did not receive prior UBR notices. Please note
address corrections. Thank you for your assistance.

Sincerely

A handwritten signature in black ink, appearing to read "Mark Ehrle". The signature is fluid and cursive, with a large loop at the end.

Mark Ehrle