

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P03000118964			
1. Corporation Name NOKOMIS PETROLEUM INC.			
2. Principal Office Address 2240 NORTH TAMiami TRAIL		3. Mailing Office Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State NOKOMIS, FLORIDA		City & State	
Zip 34275	Country U.S.A.	Zip	Country

FILED

2006 NOV -1 AM 11:58

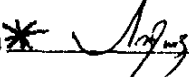
SECRETARY OF STATE
TALLAHASSEE FLORIDA

CR25001 (12/05)

4. Date Incorporated or Qualified To Do Business in Florida 10/23/2003	
5. FEI Number 20-0332039	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED ☐	

7. Name and Address of Current Registered Agent	
MUHAMMAD PERVAIZ	
2240 NORTH TAMiami TRAIL	
Suite, Apt. #, Etc.	
NOKOMIS	State FL Zip 34275

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0500, F.S.

Signature of
Registered Agent *

REGISTERED AGENT MUST SIGN

Date **10/27/2006**

9. Name and Street Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officer and/or Director	Street Address of Each Officer and/or Director	City / State / Zip
PD	MUHAMMAD PERVAIZ	2240 NORTH TAMiami TRAIL	NOKOMIS, FL. 34275
VPD	RAHEELA PERVAIZ	2240 NORTH TAMiami TRAIL	NOKOMIS, FL. 34275

REINSTATEMENT 05-06

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 contained in Chapter 119, 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

Date **10/27/2006**

941-966-1556

Date

Daytime Phone #

292

NOKOMIS PETROLEUM INC
2240 NORTH TAMiami TRAIL
NOKOMIS, FL. 34275

October 27, 2006

TO,
DIVISION OF CORPORATION
CLIFTON BUILDING
2661 EXECUTIVE CENTER CIRCLE
TALLAHASSEE, FL. 32301

Sub. Corporation Reinstatement

Re. Nokomis Petroleum Inc.
Doc # P 0300118964

Dear Sir or Madam:

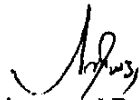
Enclosed please find Corporation Reinstatement form for the above corporation. We did not receive the Annual report for 2005. Enclosed also find a check in the amount of \$ 300.00 for the renewal fees for the annual years of 2005 and 2006.

I will be grateful if you could waive the penalties as we did not receive the Annual reports for 2005 and 2006.

I sincerely apologize for any inconvenience caused to you in this matter and hope to reinstate my corporation as soon as possible.

Thank you,

*



Muhammad Pervaiz
President