

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
11 SEP 15 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P04000134061**

1. Corporation Name

ARPAN PETROLEUM, INC.

2. Principal Office Address - No P.O. Box #

2710 S. Ridgewood Ave

3. Mailing Office Address

2710 S. Ridgewood Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

South Daytona, FL

City & State

South Daytona, FL

Zip

32119

Country

USA

Zip

32119

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

9/24/2004

5. FEI Number

830407354

☐ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Rajesh Jani

Street Address (P.O. Box Number is Not Acceptable)

2710 S. Ridgewood Avenue

Suite, Apt. #, Etc.

City

South Daytona

State

FL

Zip Code

32119

400212167304
09/15/11--01035--023 **900.00

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.

Signature of
Registered Agent

Rajesh Jani

Date

09-14-2011

REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Rajesh Jani	2710 S. Ridgewood Ave	South Daytona, FL 32119

REINSTATEMENT 10-11

B. 9/16/11

10. E-mail Address: **N/A**

(To be used for future annual report notification)

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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.

SIGNATURE:

Rajesh Jani

Rajesh Jani

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

09-14-11 386-304-7222