

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 FEB 25 PM 3:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000078058

1. Corporation Name

RAHMAN OIL INCORPORATED

2. Principal Office Address

1 N.W 119th ST, Miami, FL

Suite, Apt. #, etc.

City & State

MIAMI, FL

Zip

33168

Country

U.S.A

3. Mailing Office Address

12580, ALLENDALE CR

Suite, Apt. #, etc.

City & State

FORT MYERS, FL

Zip

33912

Country

U.S.A

700013087447
02/25/03--01031--007 **300.00

4. Date Incorporated or Qualified
To Do Business in Florida

11/05/93

5. FEI Number

65-0449539

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

PATWARY MOHAMMED M

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

12580, ALLENDALE CR

Suite, Apt. #, Etc.

City

FORT MYERS

State
FL

Zip Code

33912

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

[Signature]

REGISTERED AGENT MUST SIGN

Date 02/18/03

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
PRESIDENT	PATWARY, MOHAMMED, M	12580, ALLENDALE CR	FORT MYERS, FL-33912
SEC	PATWARY DEBORAH	12580, ALLENDALE CR	FORT MYERS, FL-33912

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.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/18/03
Date

239-768-0467
Daytime Phone #

CR2E081 (10/02)

RAHMAN OIL, INC.
12580 ALLENDALE CIRCLE
FORT MYERS, FL 33912
PHONE/FAX: 239-768-0467

February 18, 2003

Division of Corporations
Uniform Business Report Filings
P. O. Box ~~1500~~ 6327
Tallahassee, FL ~~32302-1500~~ 32314

TO WHOM IT MAY CONCERN:

It is unfortunate our check did not clear and you have not received the Uniform Business Report Renewal (UBR) either.

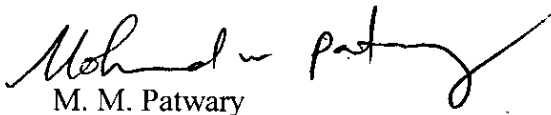
As you can see since 1993 we have been renewing every year unfortunately it has not been done in the year 2002.

Enclosed is Corporation Reinstatement form, filled out with \$300.00 check for the years of 2002 and 2003. Please don't charge us the penalty due to the fact it was a mailing error.

If you need any further assistance, please contact me at 239-768-0467.

Thank-you for your cooperation and consideration.

Sincerely yours,


M. M. Patwary
President