

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 JUN 17 PM 2:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **99700011852**

1. Corporation Name

**Prego Petroleum Inc.**

2. Principal Office Address

**10601 MENDOCINO LN**

Suite, Apt. #, etc.

City & State

**BOCA RATON FL**

Zip

**33428**

Country

**US**

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

**REINSTATEMENT 03-04**

4. Date Incorporated or Qualified  
To Do Business in Florida

**2/1/97**

5. FEI Number

**65-0725522**

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$875 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

**ERIC Prego**

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

**10601 MENDOCINO LN**

Suite, Apt. #, Etc.

City

**BOCA RATON**

State

**FL**

Zip Code

**33428**

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

REGISTERED AGENT MUST SIGN

Date **4/11/04**

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
<b>P</b>	<b>ERIC Prego</b>	<b>10601 Mendocino LN</b>	<b>Boca Raton, FL 33428</b>

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**4/11/04**

Daytime Phone #

CR2E081 (10/02)

4/11/04

TO whom it may concern.

~~I never recieved my 2003~~

(UBR). ~~my~~ Prago Petroleum Inc


needs to be reinstated. Because

~~of never receiving this paper I~~

~~would like if the reinstatement fee~~  
could be waived.

Thank you,

Eric Prago, Prago Petroleum Inc

 pres.



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

May 20, 2004

PREGO PETROLEUM, INC.  
10601 MENDOCINO LN  
BOCA RATON, FL 33428

SUBJECT: PREGO PETROLEUM, INC.  
Ref. Number: P97000011852

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We have received your document for PREGO PETROLEUM, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$300.00.

The total amount due to reinstate is \$300.00.

Please return attached letter requesting a waiver of the penalty fee.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Tina Roberts  
Document Specialist

Letter Number: 504A00035766