

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 MAR 18 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P98000060640**

1. Corporation Name

SEMINOLE PETROLEUM CORP.

2. Principal Office Address

255 CARMI CIRCLE, #

Suite, Apt. #, etc.

#1

City & State

TREASURE ISLAND, FL

Zip

33706

Country

USA

3. Mailing Office Address

255 CARMI CIRCLE

Suite, Apt. #, etc.

#1

City & State

TREASURE ISLAND, FL

Zip

33706

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

7/8/1998

5. FEI Number

59 3522368

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

DENNIS B. RECCA

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

255 CARMI CIRCLE

Suite, Apt. #, Etc.

#1

City

TREASURE ISLAND

000014313780

03/18/03--01030--021 **300.00

000014313780

03/18/03--01030--022 **8.95

State

FL

Zip Code

33706

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 of Dennis B. Recca]

REGISTERED AGENT MUST SIGN

Date **3/10/03**

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
VP	JANET A. RECCA	255 CARMI CIRCLE, #1	TREASURE ISLAND, FL 33706

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 of Janet A. Recca]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/03 **727.533.4318**

Date

Daytime Phone #

[Signature of Janet A. Recca]

3/11/03

CR2E081 (10/02)

March 10, 2003

Janet A. Recca
Seminole Petroleum
255 Capri Circle, #1
Treasure Island, Florida 33706

Divisions of Corporations
Florida Department of State
Secretary of State
P.O. Box 6327
Tallahassee, Florida 32314

Dear Sir or Madam:

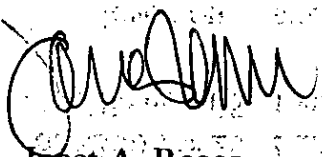
Enclosed is the completed reinstatement form along with a two checks, one for \$300 for 2002 and 2003, and another for \$8.75 to cover the fee for the Certificate of Status.

We closed our station down in order to have plans drawn up for a new facility. We did register with the post office to have our mail forwarded, however from time to time some pieces get lost in transit. I know that the 2002 correspondence your office sent to us was returned as per Justin from your offices.

Thank you for your assistance with straightening this matter out. I have adjusted the address so we should receive all future correspondence.

If you need to call me during the day, you can reach me at 727.533.4318.

Very truly yours,



Janet A. Recca