

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

102

CORPORATION
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Kathryn
Secretary of State
DIVISION OF CORPORATIONS

FILED

01 APR 24 AM 11:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P98000102504**

1. Corporation Name

Sunco oil INC.

2. Principal Office Address

Kourosh Attari

Suite, Apt. #, etc.

Suite # C

City & State

Bradenton, FL

Zip

34207

Country

U.S.A

3. Mailing Office Address

4506 26th St. West

Suite, Apt. #, etc.

Suite C

City & State

Bradenton, FL

Zip

34207

Country

U.S.A

4. Date Incorporated or Qualified
To Do Business in Florida

DEC/1999

5. FEI Number

59-3552454

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

Terence Matthews

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

5790

26th St. West

Suite D

Suite, Apt. #, Etc.

Suite D

City

Bradenton FL

State
FL

Zip Code

34207

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

Terence Matthews

Date

4/20/01

9. Names and Street Addresses of Each Officer and/or Director (Florida non-profit 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

Pres. Kourosh Attari

6391

JACKIE LYNN CT.

SARASOTA / FL / 34241

LS

5000004134985--3
-05/11/01--01015--017
******300.00 ****300.00**

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 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 application are true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Kourosh Attari

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

04/19/01 941-504-2971

Daytime Phone #

CR2E081 (9/00)

2012

From: Sunco oil, Inc.

To: Dept. of state Division of Corporations

Hi

Several months ago I was getting a loan for the business that I found out Sunco Oil Inc. was Dissolved, and sure enough after calling your office I asked them to send me an application for reinstatement. Since I had not received any application for renewal. A few weeks went by and nothing happened and I called again and this time your office was kind enough to send me an application. For that matter you can check your computer and see the fact that I have called several times.

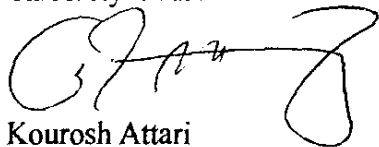
I feel that I should not be jeopardized and pay the excess fees.

Attached is a check for \$300.00.

Should you have any question Please contact me at 941-504-2971

I appreciate your considerations and Thank you in advance.

Sincerely Yours



Kourosh Attari