

F03000003126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Name	
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Verifier	DCC
Acknowledgement	DCC
W. P. Verifier	DCC



900015545199

04/15/03--01011--019 **87.50

FILED
03 JUN 24 AM 8:30
STATE OF GEORGIA
TALLAHASSEE, FLORIDA

① Suffix
② duration
③ Cert.

W030000010890

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 623392 ONTARIO LIMITED
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

ANNI ZULLO

(Name of Person)

623392 ONTARIO LIMITED

(Firm/Company)

10730 NW 66TH STREET

(Address)

MIAMI, FL 33178

(City/State and Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

ANNI ZULLO at (305) 607-4344

(Name of Person)

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

■ \$70.00 Filing Fee

■ \$78.75 Filing Fee &
Certificate of Status

■ \$78.75 Filing Fee &
Certified Copy

✓
■ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 16, 2003

ANNI ZULLO
623392 ONTARIO LIMITED
10730 NW 66TH STREET, #505
MIAMI, FL 33178

SUBJECT: 623392 ONTARIO LIMITED
Ref. Number: W03000010890

We have received your document for 623392 ONTARIO LIMITED and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6913.

Diane Cushing
Corporate Specialist

Letter Number: 903A00022864

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. 623392 ONTARIO LIMITED (INCORPORATED)
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. ONTARIO CANADA 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. MAY 6 - 1985 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 617.155, F.S.)

7. 22 FALCON COURT CAMBRIDGE ONTARIO, CANADA N1T-1
(Principal office address)
10730 NW 66TH STREET #505 MIAMI FL. 33178
(Current mailing address)

8. MARKETING AND CONSULTING SERVICES
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: ANNI ZULLO

Office Address: 10730 NW 66TH STREET #505
MIAMI Florida 33178
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Anni Zullo

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: ANNI ZULLO
Address: 22 FALCON COURT CAMBRIDGE ONTARIO CANADA
NIT-1P2

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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B. OFFICERS

President: ANNI ZULLO

Address: SAME AS ABOVE

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Anni Zullo
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. ANNI ZULLO PRESIDENT, CHAIRMAN
(Typed or printed name and capacity of person signing application)

Request ID: 005183861
Demande n° :
Transaction ID: 20987972
Transaction n° :
Category ID: CT
Catégorie :

Province of Ontario
Province de l'Ontario
Ministry of Consumer and Business Services
Ministère des Services aux consommateurs et aux entreprises
Companies and Personal Property Security Branch
Direction des compagnies et des sûretés mobilières

Date Report Produced: 2003/05/28
Document produit le :
Time Report Produced: 08:51:19
Imprimé à :

CERTIFICATE OF STATUS ATTESTATION DU STATUT JURIDIQUE

This is to certify that according to the records of the Companies and Personal Property Security Branch

D'après les dossiers de la Direction des compagnies et des sûretés mobilières, nous attestons que la société

6 2 3 3 9 2 O N T A R I O L I M I T E D

Ontario Corporation Number

Numéro matricule de la société (Ontario)

0 0 0 6 2 3 3 9 2

is a corporation incorporated,
amalgamated or continued under
the laws of the Province of Ontario.

est une société constituée, prorogée ou née
d'une fusion aux termes des lois de la
Province de l'Ontario.

The corporation came into existence on

La société a été fondée le

M A Y 0 6 M A I , 1 9 8 5

and has not been dissolved.

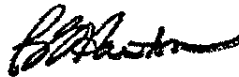
et n'est pas dissoute.

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03 JUN 24 AM 8:30
SECRETARY OF THE
TREASURY
TANAMORE, ONTARIO

Dated

Fait le

M A Y 2 8 M A I , 2 0 0 3



Director
Directrice