F9500003864

TO: QUALIFICATION/REGISTRATION SECTION DIVISION OF CORPORATIONS

SUBJECT: MAINZER MINTON CO., INC.

\$00000835788 -01/04/94--01148--001 *****70.00 *****70.00 \$00000085788 -01/04/94--01148--002 ***4081.00 ***4081.00

Dear Sir or Mada		orolan Corneratia	a for Authorization	to Transact Business in
	cate of Existent	e", and check are		ster the above referenced
Please return all c	orrespondence o	concerning this m	atter to the followin	ıg:
•	ROBERT HOFI	FMAN ne of Person)	· .	
	ARTHUR YOR	KES & COMPANY		1 1
	(Firm	n/Company) TH STREET		95 AUG SECRET
	(A	ddress)		新島 1
	NEW YORK, N	1.Y. 10018		SSI I
	(City, State	and Zip Code)		PHI2:
Should you need t	o call someone	concerning this m	natter, please call:	RIDA AIE RIDA
IRWIN G	RESCHLER	at (_212	764 - 8888	1
(Name o	f Person)	Area Code	& DaytimeTelephone Nu	imber 4 mm

(Name of corporation)

COURIER ADDRESS:

Qualification/Registration Sec. Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

MAJLING ADDRESS:

Qualification/Registration Sec. Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

W94- 323



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

January 20, 1994

MARC SHEVRIN 6662 VILLA SUNRISE D APT #322 BOCA RATON, FL 33433

SUBJECT: MAINZER MINTON CO., INC.

Ref. Number: W9400000323

SECULIARY OF STATE
SECULIARY OF STATE
AND ADDRESSES OF STATE
SECULIARY OF STATE
SECULIARY

We have received your document for MAINZER MINTON CO., INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s).

A certificate of existence, 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 an, questions concerning the filing of your document, please call (904) 487-6091.

Michael Mays Corporate Specialist

Letter Number: 094A00000522



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

January 6, 1994

ROBERT HOFFMAN 15 WEST 39TH STREET NEW YORK, NY 10018

SUBJECT: MAINZER MINTON CO., INC.

Ref. Number: W9400000323

95 AUG 10 PHI2: 16
SECRETARY OF STATE

We have received your document for MAINZER MINTON CO., INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s).

A certificate of existence, 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 (904) 487-6091.

Michael Mays Corporate Specialist

Letter Number: 094A00000522

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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

1.	MAINZER MINTON CO	. INC.,			
() 0	Name of corporation: must abbreviations of like import is or partnership if not so conta	include the word "No n language as will cla lined in the name at p	CORPORATE arly indicate ti present.)	D", "COMPANY", "CORP hat it is a corporation in	PORATION" or words or natead of a natural person
2.	NYS		3.	13-5522010	
(5	NYS State or country under the la	wof which it is incor	porated)	(FEI number, if appli	cable)
4.	1956 (Date of Incorporation	5		PERPETUAL Year corp. will coase to	
	(Date of incorporation))	(Duration:	Year corp. will coase to	o exist or "perpetual")
6.	OCTOBER 1986				.
{	Date first transacted busine	ss in Florida. <i>(See se</i>	ctions 607.15	01, 607.1502, and 817.	(C) (C)
7.	48 WEST 38TH STREE	T			50 25 170
_		0018			HASS
	+	(Current mailing addr	ess)		
8.	WHOLESALE- CONVERT	ING GREIGE GOOD	S TO FINIS	HED STATE	
٠	(Purpose(s) of corporation	authorized in home	state or count	try to be carried out in t	
9.	Name and street add	dress of Florida	registered	agent:	DA 6
	Name:	MARC SHEVRI	N		
	Office Address:	6662 VILLA SUN	RISE D, AF	PT., 322	
		BOCA RATON		, Florida	33433
	•			,,	(Zip Code)
10.	Registered agent's	acceptance:			
Hav	ving been named as re	egistered agent ar	nd to accep	t service of proces	s for the above stated
cor	poration at the place	designated in thi	s applicati	on, I hereby accep	t the appu'riment as
of a	istered agent and agre all statutes relative to h and accept the obligi	the proper and co	mplete per	formance of my du	oly with the provisions ties, and I am familiar
		/) (1			•
		Man A	herren		
		(Registered agen	t'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 addresses of officers and/or directors: A. DIRECTORS CEO Chairman: ___ARTHUR_FRIED 80 CHURCH ROAD Address: MARGANVILLE, NEW JERSEY 07751 Vice Chairman: _____JACK_SHEVRIN_ SAW CREEK ESTATE BA 15 Address: _ STROUDSBERG, PA. 18301 Director: MELVYN WEINFELD Address: 3089 TIMOTHY ROAD BELLMORE, NEW YORK 11710 Director: __ 10.72.534 Address: __ **OFFICERS**

В.

President:	JACK SHEVRIN	,				
Address: _	SAW CREEK ESTATE BA 15	_				
	STROUDSBERG, PA. 18301	_				
Vice Presi	dent: <u>MELVYN WEINFELD</u>	_				
Address: _	3089 TIMOTHY ROAD	_				
_	BELLMORE, NEW YORK 11710	_				
Secretary:	FRANCES SIROTA	_				
Address:	1 NO. LEXINGTON AVENUE					
	WHITE PLAINS, NEW YORK 10601-1712	_				
Treasurer	: JACK SHEVRIN	_				
	SAW CREEK ESTATE BA 15					
	STROUDERFRG PA 18301					

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

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

(Typed or printed name and capacity of person signing application)