

206000007276

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

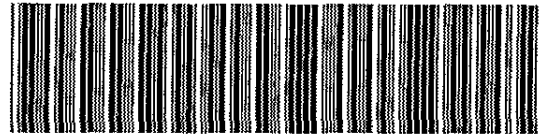
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: AMERICAN GLITTERS INCORPORATED
(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:

MASOOD RAFIQ
(Name of Person)
AMERICAN GLITTERS INC.
(Firm/Company)
1272 NW 98TH. TERRACE,
(Address)
PEMBROKE PINES, FLORIDA 33024
(City/State and Zip code)

For further information concerning this matter, please call:

MASOOD RAFIQ at 954-274 7311
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing 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

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. AMERICAN GLITTERS INC.,
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

AGI INC.,
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

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

4. APRIL 14TH. 2003 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. JUNE 1ST, 2006
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 21 BLUE DEVIL LANE, HAMILTON, N.J., 08619.
(Principal office address)

1272 NW 98TH TERRACE, PEMBROKE PINES, FL. 33024.
(Current mailing address)

8. Exports Out side US & Domestic Sales in Florida & other States.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

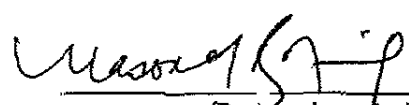
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: MASOOD RAFIQ

Office Address: 1272, NW. 98TH. TERRACE

PEMBROKE PINES, Florida 33024
(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.


(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.

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

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A. DIRECTORS

Chairman: MUHAMMAD SHAFI BATLA

Address: 21 BLUE DEVIL LANE, HAMILTON NJ. 08619

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: ASIYA MARYAM BATLA

Address: AS ABOVE

Director: MAHMOOD SHAFI BATLA

Address: AS ABOVE

Director: DAWOOD SHAFI BATLA

Address: AS ABOVE

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: MASOOD RAFIQ

Address: 1272 NW. 98TH. TERRACE, PEMBROKE PINES, FL 33024

Treasurer: _____

Address: _____

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

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. MASOOD RAFIQ

RESIDENT AUTHORISED REPRESENTATIVE

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

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

AMERICAN GLITTERS INC.
0100902178

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SECRETARY OF STATE
TALLAHASSEE, FLOR.

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on April 14, 2003.

As of the date of this certificate, said business continues as an active business in the State of New Jersey. Annual Reports are outstanding for the following year(s):

2004

I further certify that the registered agent and registered office are:

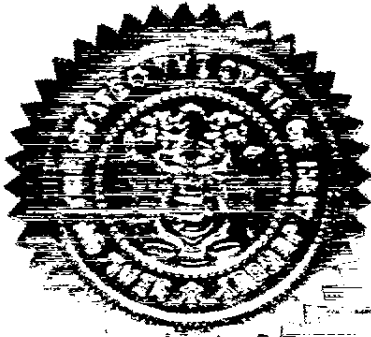
*Khalid F. Siddiqui
21 Blue Devil Lane
Hamilton, NJ 08619*

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STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

AMERICAN GLITTERS INC.

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2006 NOV 20 A 8:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
16th day of October, 2006

Bradley Abelow

Bradley Abelow
State Treasurer