

F96000005453  
TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section  
Division of Corporations

300001967583  
-10/08/96--01095--010  
\*\*\*\*\*76.75 \*\*\*\*\*78.75

SUBJECT: SENDER MANAGEMENT LTD.  
(Name of corporation - must include suffix)

W96-21246

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:

LOUIS SENDER

(Name of Person)

SENDER MANAGEMENT LTD

(Firm/Company)

10001 N.W. 50TH ST SUITE 103A

(Address)

SUNRISE, FL 33351

(City/State/Zip)

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DIVISION OF CORPORATIONS  
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Should you need to call someone concerning this matter, please call:

LOUIS SENDER  
(Name of Person)

at ( 954 ) 747-9922  
(Area Code & Daytime Telephone Number)

**COURIER ADDRESS:**

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

**MAILING ADDRESS:**

Qualification/Tax Lien Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314



**FLORIDA DEPARTMENT OF STATE**

**Sandra B. Mortham**  
Secretary of State

October 8, 1996

**LOUIS SENDER  
%SENDER MANAGEMENT LTD  
10001 N.W. 50TH ST., STE 103A  
SUNRISE, FL 33351**

**SUBJECT: SENDER MANAGEMENT LTD.  
Ref. Number: W96000021246**

We have received your document for **SENDER MANAGEMENT LTD.** and your check(s) totaling \$78.75. 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.**

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) 487-6097.

**Michael Mays**  
Document Specialist

**Letter Number: 396A00045823**

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**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. SENDER MANAGEMENT LTD. CORP.  
(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. NEW YORK  
(State or country under the law of which it is incorporated)
3. 11-2978694  
(FEI number, if applicable)
4. 7/18/89  
(Date of Incorporation)
5. PERPETUAL  
(Duration: Year corp. will cease to exist or "perpetual")
6. 9/6/96  
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. 10001 N.W. 50TH ST SUITE 103A  
SUNRISE, FL. 33351  
(Current mailing address)
8. CPA SERVICES  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. **Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)**

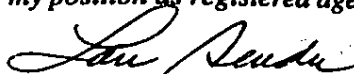
Name: LOUIS SENDER

Office Address: 10001 N.W. 50TH ST SUITE 103A

SUNRISE, Florida, 33351  
(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 addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: LOUIS SENDER

Address: 8489 CASSIA TERRACE

TAMARAC, FL 33321

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: JUDY S. SENDER

Address: 8489 CASSIA TERRACE

TAMARAC, FL 33321

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

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

14. LOUIS SENDER, PRES.  
(Typed or printed name and capacity of person signing application)

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**State of New York  
Department of State**

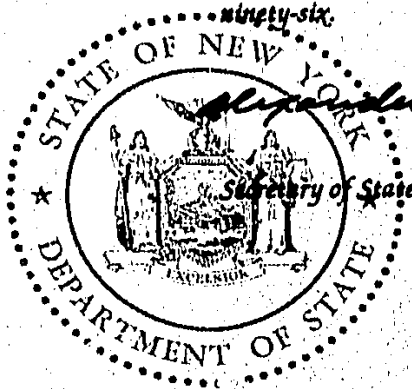
**ss:**

I hereby certify, that the certificate of incorporation of BENDER MANAGEMENT LTD. was filed on 08/18/1989, with perpetual duration, and that I have made a diligent examination of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, I find no such certificate, order or record, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

\*\*\*

Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 06th day of August  
one thousand nine hundred and

~~ninety-six,~~



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