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TRANSMITTAL LETTER

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SUBJECT	· WBS CAP	ITAL, LTD. COM	1PANY					
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Dear Sir or	Madam:							
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Please retur	n all correspo	ndence concerni	ng this matte	er to the follow	ing:			
PEDRO G.	MENOCAL or	ROBERT B. MA	ACAULAY					
	•		(Name o	of Person)				
ADORNO &	YOSS, LLP							
	···		(Firm/C	ompany)				.,
2525 PONC	E DE LEON I	BLVD. SUITE 40	00			-		
			(Add	iress)				
MIAMI, FL 3	33134					ALL		<u> </u>
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For further i	information co	oncerning this m	atter, please	call:		?; ;; 		32 (
PEDRO ME	NOCAL or R.	MACAULAY	at (305	} 460-1000)) ;; <u></u>	37 1 = 1 = 1	2: 08
(Na	ame of Person)	(Area	Code & Dayti	me Telepho	one Number)	⊷ '	
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Enclosed is	a check for th	e following amo	unt:					
□ \$70.00 F	iling Fee	□ \$78.75 Filing Certificate o		□ \$78.75 Filin Certified Co	_	\$87.50 Find Certification	ite of	Status &



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 11, 2005

PEDRO G. MENOCAL ADORNO & YOSS, LLP 2525 PONCE DE LEON BLVD, STE 400 MIAMI, FL 33134

SUBJECT: WBS CAPITAL, LTD. COMPANY

Ref. Number: W05000012801

We have received your document for WBS CAPITAL, LTD. COMPANY 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 document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 705A00016952

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.		LTD. COMPANY			
		orporation; must include "INCORPORATION," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"	
	(If name unavaila	ble in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Florida)	•
2.	DELAWARE		3.		
	(State or country t	under the law of which it is incorporated)		(FEI number, if applicable)	•
4.	MAY 11, 2004		5.	PERPETUAL	_
	(Date	of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	
6.	N/A				-
				n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
7.	2711 CENTERV	ILLE ROAD, SUITE 400, WILMINGTO	N,	DE 19808	
		(Principal office	add	ress)	•
	c/o ATT: ROBER	RT MACAULAY, 2525 PONCE DE LEG	ΟŅ,	SUITE 400, CORAL GABLES, FL 33134.	
		(Current mailing	add	ress)	
8.	ANY LAWFUL F				_
	(Purpose(s)	of corporation authorized in home state of	r co	ountry to be carried out in state of Florida)	
9.	. Name and street	address of Florida registered agent: (P.C	O. Box NOT acceptable)	=
	Name:	PEDRO G. MENOCAL			Ī
0	office Address:	2525 PONCE DE LEON BLVD., SUI	TE	400 CO	U
		CORAL GABLES		, Florida 33134	
		(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.
- 12. Names and business addresses of officers and/or directors:

A. DIRE	CTORS
Chairman	LEANDRO DEPONTES
Address:	c/o ROBERT MACAULAY, ADORNO & YOSS, LLP, 2525 PONCE DE LEON, SUITE 400
	CORAL GABLES, FLORIDA 33134
Vice Chai	man:
Address:	
_	
Director:	
Address:	
-	
Director:	
Address:	
B. OFFI	CERS
	LEANDRO DEPONTES
	c/o ROBERT MACAULAY, ADORNO & YOSS, LLP, 2525 PONCE DE LEON, SUITE 400
_	CORAL GABLES, FLORIDA 33134
Vice Presi	lent:
Address: .	
•	
Secretary:	<u> </u>
Address: _	D8
Treasurer	OURDES DEL CASTILHO
Address: _	700 S ROYAL POINCIANA BLVD. SUITE 1000, MIAMI SPRINGS FL
note: Į	33166 f necessary, you may attach an addendum to the application listing additional officers and/or directors.
13.	Avastiche
	(Signature of Director or Officer listed in number 12 of the application)
14	LOURDES DEL CASPILHO
	(Typed or printed name and capacity of person signing application)

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WBS CAPITAL LTD." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF MARCH, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WBS CAPITAL LTD." WAS INCORPORATED ON THE SIXTH DAY OF FEBRUARY, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 3722965

DATE: 03-04-05

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