F00000001808 5

TRANSMITTAL LETTER

To: Qualification/Tax Division of Corpo			
SUBJECT:	•	TRIENTORS L	46
BOBJECT.	(Name of corporation	n - must include suffix)	<u> </u>
Dear Sir or Madam:			
			* * . T01 - * 1 . 12
	1 by Foreign Corporation for a 2 and check are submitted to r rida.		
Please return all correspon	dence concerning this matter	to the following: 300	00031726737 -03/16/0001067010
	Ampreus S	3,600	******87.50 *****87.50
	(Name of	Person)	A CONTRACTOR OF THE CONTRACTOR
	ASIA DI	STRIBUTORS.	Ital. W-7318
	(Firm/Cor	npany)	
	03 0018	148 24586A	-
	(Addr	ess)	
6 7777	Hrow	HU 33123	<u>. </u>
	(City/Sta	te/Zip)	
			NEO 80
Should you need to call so	meone concerning this matter	r, please call:	
1 200 0	20 " (3DI	, 773- 932	ω –
(Name of Person)	at (3 =	Code & Daytime Telephone	
(Name of Possen)	(11100)	sout of Buy mile Telephone x	\$ 10 E
STREET ADDRESS:		MAILING ADDRESS:	
Qualification/Tax Lien Se	ction	Qualification/Tax Lien Sec	tion unt
Division of Corporations		Division of Corporations	- 1
409 E. Gaines St. Tallahassee, FL 32399		P.O. Box 6327 Tallahassee, FL 32314	3/31
Enclosed is a check for the	following amount:		
☐ \$70.00 Filing Fee ☐	☐ \$78.75 Filing Fee & ☐ Certificate of Status	\$78.75 Filing Fee & Z	\$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 23, 2000

ANDREW SIEW 8100 SW 178 STREET MIAMI, FL 33157

SUBJECT: ASIA DISTRIBUTORS LTD.

Ref. Number: W0000007318

We have received your document for ASIA DISTRIBUTORS LTD. 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.

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) 487-6097.

Michael Mays Document Specialist

Letter Number: 500A00015145

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. 29070818720RS (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.) (FEI number, if applicable) (State or country under the law of which it is incorporated) (Duration: Year corp. will cease to exist or "perpetual") 5000 (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (Current mailing address) (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) Office Address: 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)

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

which it is incorporated.

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

A. DIRECT	ORS (Street address only - P.O. Box NOT acceptable)		
Chairman: _	EDVICE TO THE STATE OF THE STAT	TALS CONTROL TRANSPORT OF CONTROL OF CONTRO	718 - 11th
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Vice President			. 584
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NOTE: If nec	cessary, you may attach an addendum to the application listing additional office	ers and/or directors.	
13.			
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 c	f the application)	
4	COBY CONSTRAINT	CONTRACTOR OF THE PROPERTY OF	II.'a
	(Typed or printed name and capacity of person signing app	oncanon)	

