

FO10000000797

TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CDR OUTLET, INC.  
(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:

600003673246--3  
-02/09/01--01107--025  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

STEVE STAFFORD

(Name of Person)

CDR OUTLET, INC.

(Firm/Company)

933 BEVILLE RD #103-A

(Address)

SOUTH DAYTONA, FL 32119

(City/State and Zip code)

For further information concerning this matter, please call:

STEVE STAFFORD

(Name of Person)

at 904, 763-2056

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

MAILING ADDRESS:

Registration 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

FILED  
00 FEB -9 PM 9 35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

with  
2/12

**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. CDR OUTLET, INC.  
(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. NEVADA 3. 88-0421414  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. DEC 3 - 1999 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 02-01-2001  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 933 BEVILLE RD #103-A SOUTH DAYTONA, FL 32119  
(Principal office address)  
933 BEVILLE RD #103A SOUTH DAYTONA FL 32119  
(Current mailing address)

8. SELLING OF MATERIALS & SUPPLIES FOR RECORDING COMPACT DISCS.  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

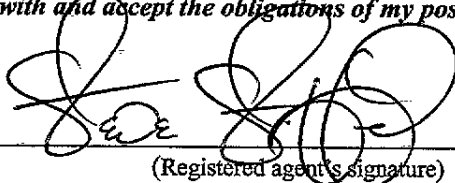
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: STEVE STAFFORD

Office Address: 933 BEVILLE RD #103-A  
SOUTH DAYTONA, Florida 32119  
(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.

FILED  
FEB - 9 PM 9:35  
STATE OF FLORIDA  
TALLAHASSEE

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

A. DIRECTORS

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

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

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

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

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

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

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

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

B. OFFICERS

President: Steve Stafford

Address: 874 Sugar Lane Ct.  
Port Orange, FL 32119

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

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

Secretary: Elvia G. Stafford

Address: 874 Sugar Lane Ct. Port Orange FL 32119

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

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

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

13. \_\_\_\_\_

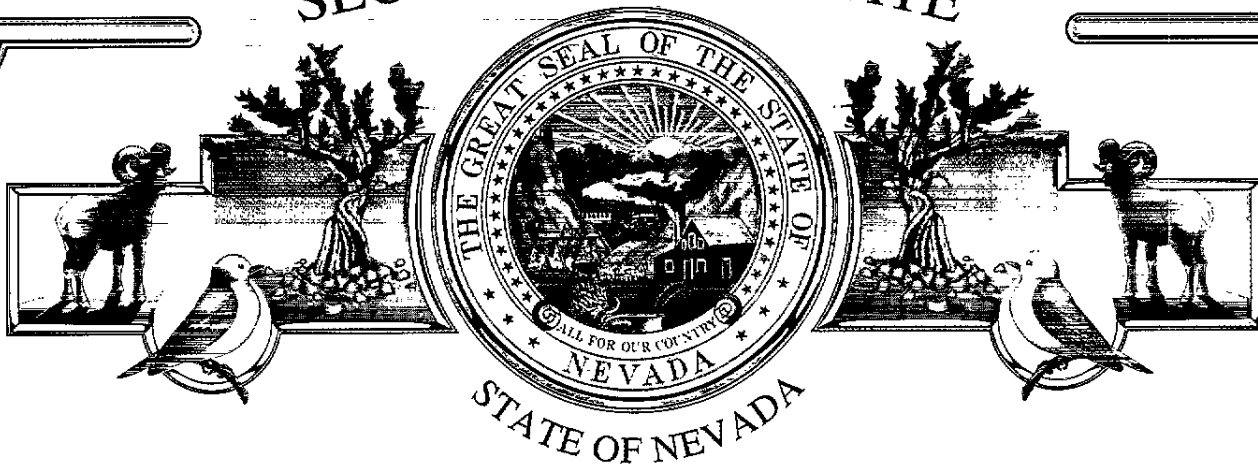
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. STEVE STAFFORD, PRESIDENT

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

FILED  
00 FEB -9 PM 9:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **CDR OUTLET, INC.** as a Corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 3, 1999, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand  
and affixed the Great Seal of State, at my office, in  
Las Vegas, Nevada, on **December 6, 2000.**

*Dean Heller*

Secretary of State

By

*Kamlesh Bhardwaj*

Certification Clerk

