

# FOI 0000002657

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May 10, 2001

Secretary of State  
Corporations Division  
Post Office Box 6327  
Tallahassee, Florida 32314

800004216358--6  
-05/15/01--01020--013  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

Re: Application by Foreign Corporation for  
Authorization to Transact Business in Florida/  
Wave Foods, Inc.

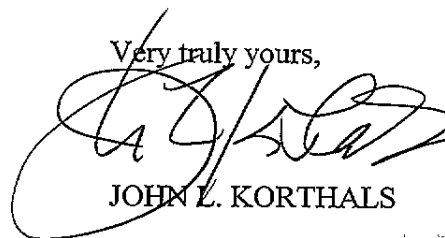
Dear Sir or Madam:

Enclosed please find the original and one copy of an Application by Foreign Corporation for Authorization to Transact Business in Florida for Wave Foods, Inc., an original Certificate of Good Standing from the State of Delaware for Wave Foods, Inc., and our Trust Account Check No. 8046 in the amount of \$87.50, to cover the cost of the following:

Filing Fee	\$ 70.50
Certified Copy	8.75
Certificate of Status	<u>8.75</u>
	\$ 87.50

Please return the Certified Copy and the Certificate of Status to this office at your earliest possible convenience. If you should need anything further, please feel free to call. Thank you for your cooperation.

Very truly yours,

  
JOHN L. KORTHALS

JLK/msb  
Enclosures

FILED  
MAY 15 AM 8:15  
JLK/msb  
5/17

**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. Wave Foods, 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. Delaware  
(State or country under the law of which it is incorporated)
3. 65-1100244  
(FBI number, if applicable)
4. May 4, 2001  
(Date of Incorporation)
5. Perpetual  
(Duration: Year corp. will cease to exist or "perpetual")
6. June 1, 2001  
(Date first transacted business in Florida (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. 301 S.W. 15<sup>th</sup> Avenue, Boca, Raton, Florida 33486  
(Current mailing address)
8. Wholesale food sales  
(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: Gary Lenz

Office Address: 301 S.W. 15<sup>th</sup> Avenue

Boca Raton, Florida, 33486  
(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.*

GARY LENZ  
(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 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: Gary Lenz

Address: 301 S.W. 15<sup>th</sup> Avenue, Boca Raton, FL 33486

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

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

Director: Gary Lenz

Address: 301 S.W. 15<sup>th</sup> Avenue, Boca Raton, FL 33486

Director: Tasnai Kraiwattanapong

Address: 126/2 Moo 4 Surat-Nakornsri Road, Muang-District, Suratthani, Thailand 84000, P.O. Box 40

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

President: Gary Lenz

Address: 301 S.W. 15<sup>th</sup> Avenue, Boca Raton, FL 33486

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

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

Secretary: \_\_\_\_\_

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

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. Gary Lenz, Chairman, President

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

FILED  
MAY 15 AM 8:15  
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SECRET  
TWO

*State of Delaware*  
*Office of the Secretary of State*

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PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WAVE FOODS, INC." 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 NINTH DAY OF MAY, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED  
01 MAY 15 AM 8 15  
SECRETARY OF STATE  
DELAWARE



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 1123616

DATE: 05-09-01