Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

: (850)205-0383 Fax Number

From:

: M. BURR KEIM COMPANY Account Name

Account Number : 119990000242 : (215)563-8113

Phone

: (215)977-9386 Fax Number

AL

FOREIGN PROFIT QUALIFICATION

ODELAS ANTIQUES, INC.

Certificate of Status	
Certified Copy	
Page Count	05
Estimated Charge	\$78.75

Elactropic Pilace Marile

01/18/2002

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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. ODELAS ANTIQUES, 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.) New Jersey (State or country under the law of which it is incorporated) (FEI number, if applicable) February 20, 2001 (Duration: Year corp. will cease to exist or "perpetual") (Date of incomporation) Upon qualification (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 55 Flanigan Way, Secaucus, NJ 07094 (Current mailing address) To buy and sell antiques (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: Maria Artigos Office Address: 6779 South West 14th Street _____, Florida, 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.

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

of which it is incorporated.

(Registered agent's signature)

Maria Artigos

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

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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)

~~1.44444 1 4 4 4 4		
Address	55 Flanigan Way, Secaucus, NJ 07094	
Vice Ch	airman:	
Address	s:	
Director	:	
Address	*	
		8
Director		<u></u>
B. OFF	TCERS (Street address only- P. O. Box NOT acceptable)	
Presiden	t: Odetro Lastra	
Address:	55 Flanigan Way, Secaucus, NJ 07094	
Vice Pre	sident:	
Address:		
	-	
Secretary	y:	
•		
Treasure	1 ;	
Address:		
NOTE: officers a	If necessary, you may attach an addendum to the application listing additional and/or directors.	
· 13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	_
	fasting on severation area seasoned area, cultural imped in maiou, 15 of the slibiterion)	
14	Odetto Lastra (Typed or printed name and capacity of person signing application)	_

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STATE OF NEW JERSEY DEPARTMENT OF TREASURY SHORT FORM STANDING

ODELAS ANTIQUES, INC.

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on February 20, 2001.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Odeto Lastra 55 Flanigan Way Secaucus, NJ 07094

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