F02000001831

TRANSMITTAL LETTER

TO:	Registration S Division of Co	orporations									
SUBJ	ECT:	STE	RN'S Name of corp	TR	lavel	Gui	les,	Ltd.			
		(Name of corp	oratio	n - must in	clude suff	ĭx)				
Dear S	ir or Madam:										
"Certif	closed "Applica icate of Existen sact business in	ce", and chec	gn Corporatio k are submitte	on for a	Authorizat egister the	ion to Trai above refe	nsact Bu erenced	isiness in Flo foreign corp	orida", oration	ı	
Please	return all corres	spondence cor	cerning this 1	matter	to the follo	owing:	000	10051	472	20.	7
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			(Fir	m/Con	npany)		· =- <u>.</u> ·				·
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	- (<u> </u>	(City/S	State ar	nd Zip cod	e)	<u> </u>			_	
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For furt	ther information Name of Personation T ADDRESS: ation Section of Corporation	concerning t	his matter, ple	ease ca	ıII:			1			
		_	7.						02		
STE	EVEN B-	STERN	at (5	7	99	5-0	960	至常	=		
	(Name of Person	on)	(A	rea C	ode & Day	time Tele	phone N	lumber &	- ×ŏ	FILE	
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409 E. C	Gaines St.				P.O. Box 6	i Corpora	uons				
Tallahas	ssee, FL 32399				Tallahasse						
Enclose	d is a check for	the following	amount:					FC2	-/	831	
\$70.0	00 Filing Fee	□ \$78.75 F	iling Fee &		\$78.75 Fili			887.50 Filing	Fee,		
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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 28, 2002

STEVEN B STERN STERN'S TRAVEL GUIDES, LTD 3368 NW 53RD CIR BOCA RATON, FL 33496

SUBJECT: STERN'S TRAVEL GUIDES, LTD

Ref. Number: W02000008689

We have received your document for STERN'S TRAVEL GUIDES, LTD and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list your Federal Employer Identification Number in the appropriate block. If applied for, enter "applied for", or if not applicable, enter "N/A".

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The entity's date of incorporation/organization must be listed in the document.

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Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificateof existence from the same office that provided you with the certified copy.

Eveloue

Please return your document, along with a copy of this letter, within 60 your filing will be considered abandoned.

FILE BR 12 BHASSER CALL

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If you have any questions concerning the filing of your document, please (850) 245-6097.

Lakysha Francis Document Examiner

Letter Number: 902A00018544

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. STERN'S TRAVEL Guides, Ltd. CUIP. (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. \(\frac{\frac{1}{\sqrt{\sq}}}}}}}}}}}} \sqrt{\sq}}}}}}}}}}} \signtimeset\signtifta}}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqr\sincestexi\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}} \end{\sqint{\sqrt{\sint{\sint{\sint{\sint{\sint{\sind{\sind{\sind{\sind{\sind{\sind{ 4. 10-15-86
5. Perpetual (Duration: Year corp. will cease to exist or "perpetual") 6. UPON Qualification.")

(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.) 3368 NW 53rd/ Circle Boca Laton, F1 33496 (Principal office address) (Current mailing address) OFFICERS WRITE TRAVEL Guides and TRAVEL Anticles
(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: STRURN B. STRRN

Office Address: 3368 NW 53 rd/ Curle

Boca Parton , Florida 33496

(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:

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	3368 NW 53 Ml Oriele
idress:	Boea Raton, F1 33496
	•
ce Chairman:	
ldress:	
rector:	
dress:	
rector:	
	TAS 8
OFFICERS	R STRAN
esident:	Struen B. STERN PR BA
ldress:	Struen B. Stern ALLAHASSEE, FELD
	ORIDA 4:
ldress:	
cretary:	STERN B. STERN
dress	Steven B. STERN (See abort)
,	
ldress:	
OTE: If nece	essary, you may attach an addendum to the application listing additional officers and/or directors.
	Horsen B Sen
-	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
·	STEVEN B. STERN President
-	(Typed or printed name and capacity of person signing application)



To all to whom these Presents Shall Come, Greeting:



day of ______ A.D. _____2002

Desse White