F02000001895

TO: Registration Se Division of Co		
SUBJECT:	FLAVORT IMPORT INC	
	(Name of corporation - must include suffix)	
Dear Sir or Madam:	100	0051894516 -04/03/0201048010 *****87.50 *****87.50
	tion by Foreign Corporation for Authorization to Transact ce", and check are submitted to register the above reference Florida.	Business in Florida",
Please return all corresp	pondence concerning this matter to the following:	7A.
M	ARC To COLIN (Name of Person)	02 M
	(Name of Person)	## 75 F
72	AVOR IMPORT INC.	
	(Firm/Company)	
1627 BR	CICKELL AVENUE SUITE 260	8: 3 STAT LORE 8: 3
	(Address)	
MIAMI	FL 33129	
	(Ćity/State and Zip code)	
For further information	concerning this matter, please call:	
MARC F. CO	0//N at (305) 854-575	-6
(Name of Perso	on) at (305) 854.575 (Area Code & Daytime Telephone	Number) \
STREET ADDRESS: Registration Section Division of Corporation 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDRESS: Registration Section	Number) (49)
Enclosed is a check for	the following amount:	4
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 9, 2002

MARC COLIN 1627 BRICKELL AVENUE, SUITE 2607 MIAMI, FL 33129

SUBJECT: FLAVOR IMPORT INCORPORATED

Ref. Number: W02000009903

We have received your document for FLAVOR IMPORT INCORPORATED 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 entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 702A00020948

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT RUSINESS 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.		_
	(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.	(State or country under the law of which it is incorporated) 3. 91-2053806 (FEI number, if applicable)	
4.	(PER Internole, it appreciate) TANUARY 19 2000 (Date of incorporation) 5. PER PETUAL (Duration: Year corp. will cease to exist or "perpetual")	
6.	(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.	7801 N W 37 5T- SVITE 203 MIAMI FL 33166 PS OF PROBLEM (Principal office address) P.O. Box 310 789 MIAMI FL. 33231 (Current mailing address)	
8.	<u> </u>	[]
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
	Name: MARC F. COLIN	
Of	fice Address: 1627 BRICKELL AVENUE #2607	
	MiAMI [°] , Florida 33/29 (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. Mames and business addresses of officers and/or directors:

Chairman: MARC. F. COUN	
Address: 1627 BRICKELL AVE. # 2607	
MIAMI 72 33129	
/ice Chairman:	
Address:	
pirector:	
.ddress:	, •
	TA'S 0
irector:	02 APR
ddress:	
	FILED 17 AM 8:: ANY OF STA ASSEE, FLOR
OFFICERS	8: 30 STATE LORID
esident: <u>MARC</u> F. COLIN) A
ddress: 1627 BRICKELL AVE. #2607	
MIAMI FL. 33129	
ce President: HARIE F. COLIN	
Idress: 1627 BRICKEU AVE # 2607	
MIAMI FL 33/29	
cretary: MARC F. COLIN	
Idress: 1627 BRICKEU AVE # 9607	4/AMI FL 33129
easurer:	
ldress:	w
	·
OTE: If necessary, you may attach an addendum to the application listing addition	nal officers and/or directors.
(Signature of Chairman, Vice Chairman, or any officer listed in num	aber 12 of the application)
. NARC F. COUN / PRESIDE	
(Typed or printed name and capacity of person signing appl	ication)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FLAVOR IMPORT 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 TWENTY-EIGHTH DAY OF MARCH, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FLAVOR IMPORT INC. " WAS INCORPORATED ON THE NINETEENTH DAY OF JANUARY, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1694624

3161587 8300

020204858

DATE: 03-28-02