TO: Registration Section Division of Corporations

	•			•
SUBJECT:OE	NTENNIAL ENTER	PRISES. INC		
	(Name of cor	poration - must include suffi	v) 0.	·
Dear Sir or Madam:	•	mot metace sum.	SECULE SECULE	7
The enclosed "Applicate of Existent to transact business in	ice , and there are simmin	on for Authorization to Transed to register the above refer	enced foreign corporate	LED
Please return all corre	spondence concerning this	matter to the following:	ON THE STATE OF TH	
TRISH VE		- January Company States		·
	(Na	me of Person)		<u></u>
CENTENNIA	L ENTER PRISES	INC a/b/a TRISH	NEVEDA DALA	ITIOLE
	(Fir	n/Company)	VEICIGI FAIR	<i>(17)</i>
_ 1/32 GLEN	GAD RUN	,		
		Address)	0000734629 08/26/02=000	359 6002
On Maria Z		·		***70.80
ORMOND B		274		
	(City/S	tate and Zip code)		
				200
For further information	concerning this matter, ple	ase call:		
			BK	
MEL OR TR	ISH at (3)	86 1 615-1364	* .	
(Name of Pers	on) (A	rea Code & Daytime Teleph	one Number	वितित्ताः स ्रो
	•	- La	one ranner)	
STREET ADDRESS: Registration Section		MAILING ADDRES Registration Section	S:	
Division of Corporation	S	Division of Corporation	w.c	
409 E. Gaines St.		P.O. Box 6327	1115	
Tallahassee, FL 32399		Tallahassee, FL 3231	1	
Enclosed is a check for	the following amount:			
SX \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	 \$87.50 Filing Fee, Certificate of Statu Certified Copy 	ıs &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIAN REGISTER A F	ICE WITH SECTION 607.1503, F. FOREIGN CORPORATION TO TR	LORIDA STATUTES, 1 PANSACT BUSINESS I	THE FOLLOWING IS SUBM IN THE STATE OF FLORID	TTTED TO
1. CENTE	NNIAL ENTERPRISES, I	nto.	ט ע	
(Ivame of corr	Oration: must include the word "INIC!	DDODATED# #GOVED	4 2 YY 7 10 11 11 11 11 11 11 11 11 11 11 11 11	2
natural person	or partnership if not so contained in t	will clearly indicate that he name at present.)	it is a corporation instead of a	ST S
2. <u>ILLIN</u> (State or count	/O/S ry under the law of which it is incorpo	3	37-1005969	100 00 P
4 07-08	-1976	raiety E Ose	(FEI number, if applicable)	THE WASHINGTON
(Da	2-1976 ate of incorporation)	(Duration, 3	Kreioal	
6. UP0	N QUALIFICATION	(Duration:)	Year corp. will cease to exist or	"perpetual")
(Date first trans	N QUALIFICATION acted business in Florida. If corporat	ion has not the said XX	· · · · · · · · · · · · · · · · · · ·	
	(SEE SECTIONS	607.1501, 607.1502 and	d 817.155, F.S.)	ualification.")
7. //32 G	Principal	MOND BEACH	F1 32174	
	(Principal	office address)	<u> </u>	
(same	as above) (Current m			e ga n na le estado
	(Current m	ailing address)		2 1 mg
8. ART S	BALES			
(Purpose	SALES (s) of corporation authorized in home	state or country to be car	ried out in state of Florida)	<u> </u>
9. Name and str	eet address of Florida registere	l agent: (P.O. Box or	Mail Drop Box NOT accept	able)
	TRISH VEVERA (A		· · · · · · · · · · · · · · · · · · ·	
Office Address:	1132 GLENGAD RUN	48-75 per 1949 (1951)	The state of the control of the state of the	n= , ;; , , ,:
	OR MOND BEACH (City)	Florida	32174	
	(City)	, + 102,000	(Zip code)	fati i transfer i i i i i i i i i i i i i i i i i i i
Having been nan lesignated in this Turther agree to c	gent's acceptance: ned as registered agent and to acc s application, I hereby accept the comply with the provisions of all s familiar with and accept the oblig	ept service of process appointment as registe tatutes rolative to the	for the above stated corpora ered agent and agree to act i	tion at the place In this capacity. I mance of my
	Jatricia L. (Registered a			
	(Registered a	gent's signature)		t i te i transcription
1 Attached to a				

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 busine	ss addresses of officers	and/or directors:					
A. DIRECTORS	л. \$						
Chairman:			*		, gr		
Address:				72	· · · · ·	<u> </u>	<u> 1948년 14 3 - 영국</u>
		· · · · · · · · · · · · · · · · · · ·			Dec.	7	<u> </u>
Vice Chairman:					7	25°	(C)
Address:	me	***		T : ==	**************************************	1. C. 14	
	2	· · · · · · · · · · · · · · · · · · ·					<u> </u>
Director:	c.1 Cler				- Ju	7	
Address:	OFF				9. ⁷⁷		<u> </u>
	1			7 4 W			
Director:	1	the second of th		1			<u> </u>
Address:		<u> </u>				·三 ····	<u> </u>
		<u> </u>					<u> </u>
		= 12 to 12 to 18 10 per	<u> </u>		· <u>-</u> -	<u> </u>	- <u> </u>
B. OFFICERS							
President: MELVIN						<u>.</u>	<u></u>
Address:							<u> </u>
	D BENEH FL	32174		year sometimes to	<u>-6 = 7 ,</u>	<u> </u>	2
•		<u> </u>	<u>.</u>	<u> </u>		:	
Address:		· · · · · · · · · · · · · · · · · · ·	·		· ·	는 <u> </u>	
		- Transfere do T.	<u> 1 </u>	<u></u>	<u> </u>		- 2
Secretary: PATRIC	CIA L VEVERA	<u> </u>			<u>₹</u> = 7 =	and the same of th	Philadella
Address: <u>£ // 3 2</u> 0	SLENGAD RUN	ORMOND	BEA	eh FL	32174		
Freasurer:		المناب		, t. +	. F= 1 F1		
Address:	<u> </u>		: ·				
JOTE, te						<u></u>	
NOTE: If necessary, you	may attach an addendum	to the application l	isting add	itional officer	s and/or dire	ctors.	
3Signature	ecia & Veve of Chairman, Vice Chair	man on one off	11-1-1	<u> </u>	- <u>-</u>	<u> </u>	<u>讀 - 1</u> 5
4. PATRIC	OIA L VEVELA	man, or any officer	usted in	number 12 of	the application	on)	
(T)	yped or printed name and	capacity of person	Signing a	FASURER pplication)		<u> </u>	<u></u> 93 °-
		- A	~ - 0 ~	· · · · · · · · · · · · · · · · · · ·			

File Number



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that



In Te	stimony	Where	cof, I, hereto set
			Great Seal of
			- 15TII
	AUGUST		2002

Desse White