

**F03000001543**

**Florida Department of State  
Division of Corporations  
Public Access System**

**Electronic Filing Cover Sheet**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H03000094590 4)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

**To:** Division of Corporations  
Fax Number : (850) 205-0383

**From:** Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

**RECEIVED**  
03 MAR 28 PM 2:21  
DIVISION OF CORPORATION

**FOREIGN PROFIT QUALIFICATION  
TRI-STAR OIL CORPORATION (USA) INC.**

Name Availability	
Document Examiner	DCC
Updater	DCC
Updater Verifier	DCC
Admission Lodgement	DCC
W. P. Verifier	DCC

Certificate of Status	0
Certified Copy	1
Page Count	034
Estimated Charge	\$78.75

**FILED**  
03 MAR 28 PM 3:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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. TRI-STAR OIL CORPORATION (USA) 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 3. 01-0773186  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 3/6/2003 5. PERPETUAL  
(Date of incorporation) (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.)
7. 1835 Ponce de Leon Blvd Suite 186 Coral Gables, FL 33134  
(Principal office address)  
same  
(Current mailing address)
8. Brokers  
(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: RAMIRO SANCHEZ  
Office Address: 500 MARGHERA AVE  
Coral Gables, Florida 33134  
(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.

FILED  
 03 MAR 28 PM 3:19  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

EO3000094590 4

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: ZARCO TENJER

Address: 500 MADEIRA AVE  
Coral Gables, FL 33134

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

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

Director: ANCEIL GARVIN II

Address: 500 MADEIRA AVE  
Coral Gables, FL 33134

Director: \_\_\_\_\_

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

B. OFFICERS

President: OLE R. SPARTEN

Address: 500 MADEIRA AVE  
Coral Gables, FL 33134

Vice President: RAUL CRISTOBAL LOPEZ

Address: 500 MADEIRA AVE  
Coral Gables, FL 33134

Secretary: RAMIRO SANCHEZ

Address: 500 MADEIRA AVE, Coral Gables, FL 33134

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. RAMIRO SANCHEZ, Secretary

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

FILED  
MAR 28 PM 3:18  
SECRETARIAT  
TALLAHASSEE, FLORIDA

EO3000094590 4

# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF INCORPORATION OF "TRI-STAR OIL CORPORATION (USA) INC.", FILED IN THIS OFFICE ON THE SIXTH DAY OF MARCH, A.D. 2003, AT 9 O'CLOCK A.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.

FILED  
03 MAR 28 PM 3:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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

AUTHENTICATION: 2294093

DATE: 03-07-03

3633050 8100