

F03000002444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

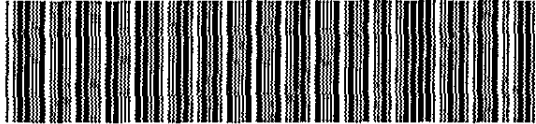
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Entity	
Document	
Number	DCC
Fee	Office Use Only
Payment	DCC
Signature	DCC
Notarization	DCC
Verification	DCC



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TALLAHASSEE, FLORIDA

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Carol Laws GAVE
NOTARIZATION BY PHONE TO
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ARBOR INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

ROBERT H. MILLER
(Name of Person)

(Firm/Company)

1645 SOUTH MIAMI AVENUE
(Address)

MIAMI, FLORIDA 33129
(City/State and Zip code)

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For further information concerning this matter, please call:

CAROL LAWS at (604) 224-2503
(Name of Person) (Area Code & Daytime Telephone Number)

Courier Address:
STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

Mailing Address:
MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

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. ARBOR 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. STATE OF NEVADA (State or country under the law of which it is incorporated) 3. * applied for (FEI number, if applicable)

4. FEBRUARY 25, 1999 (Date of incorporation) 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.)

7. 1645 SOUTH MIAMI AVENUE, MIAMI FLORIDA 33129 (Principal office address)

1645 SOUTH MIAMI AVENUE, MIAMI FLORIDA 33129 (Current mailing address)

8. X CORPORATE MANAGEMENT (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: ROBERT H. MILLER

Office Address: 1645 SOUTH MIAMI AVENUE MIAMI, Florida 33129 (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.

X [Signature] (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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: MICHAEL COSTAS TAKKAS

Address: 305-2642 COLLINS AVENUE, MIAMI FL 33140

Director: STEPHEN SPOONAMORE

Address: 4010 WOODLAND PARK AVE N
SEATTLE, WA 98103

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: COSTAS MICHAEL TAKKAS

Address: 305-2642 COLLINS AVENUE
MIAMI, FL 33140

Vice President: _____

Address: _____

Secretary: STEPHEN SPOONAMORE

Address: 4010 WOODLAND PARK AVE N. SEATTLE WA 98103

Treasurer: ROBERT HILLIS MILLER

Address: 1645 SOUTH MIAMI AVENUE, MIAMI FL 33129

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

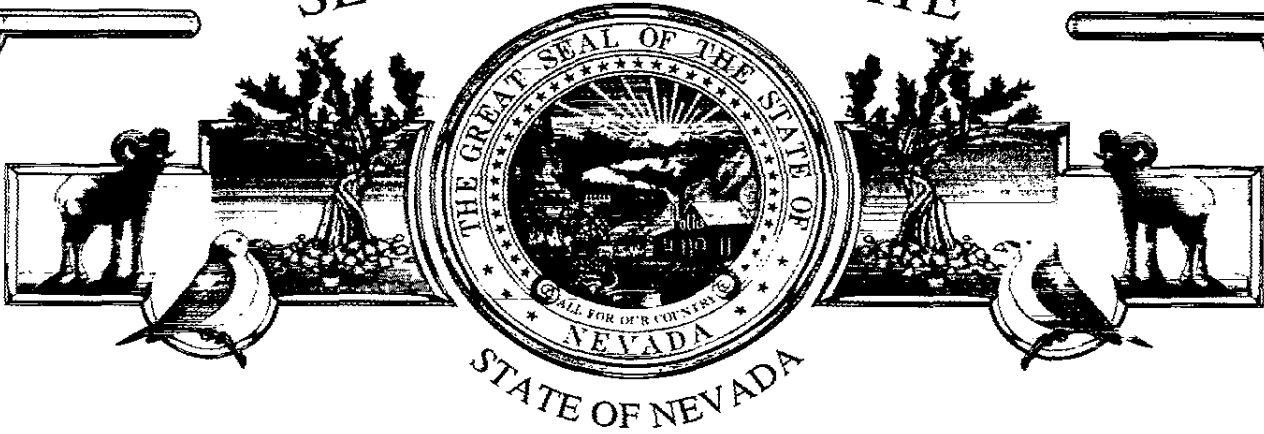
13. _____

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. TREASURER ROBERT HILLIS MILLER

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

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **ARBOR, INC.**, as a corporation duly organized under the laws of **NEVADA** and existing under and by virtue of the laws of the State of Nevada since February 25, 1999, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on February 28, 2003.



Dean Heller

DEAN HELLER
Secretary of State

By

[Signature]

Certification Clerk