

F03000003189

(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:

Name
Availability

Document
Number

DCC

Updater

Office

Use Only

Updater

DCC

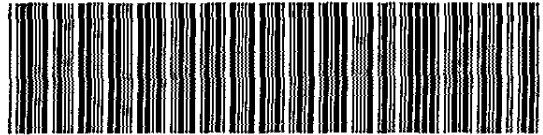
Verifier

Agreement

DCC

Verifier

DCC



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05/29/03--01033--003 **96.25

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① Cert
② Qualify?

**Vijaydev Mistry Foundation Inc.
P.O.Box 46877
Tampa, FL 33647**

**Florida Department of State
Division of Corporations
P.O.Box 6327
Tallahassee, FL 32314**

5/27/03

To Whom It May Concern:

Enclosed herewith, please find: -

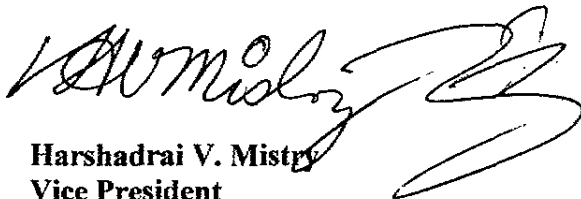
- a. Application for registration**
- b. Check for (\$ 96.25) which is \$ 87.50 + \$8.75**
- c. Copy of the filing receipt**

If you have any questions, please contact :

**Usha Mistry
(813) 971 3750**

Thanking you.

Sincerely,



**Harshadrai V. Mistry
Vice President**

P.S. We need the registration number ASAP to pay our sales tax. Thank you.

Vijaydev Mistry Foundation Inc.
P.O.Box 46877
Tampa, FL 33647
(813)971-3750

June 21, 2003

Diane Cushing
Florida Department of State
Divisions of Corporations
P.O.Box 6327
Tallahassee, FL 32314

RE: VIJAYDEV MISTRY FOUNDATION INC
REF. # W03000015651

Dear Ms. Cushing,

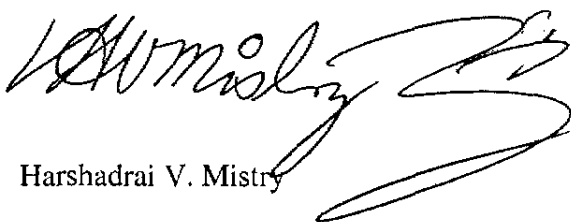
Please find the following:

1. Certificate of Good Standing
2. Copy of your letter
3. Application form to transact business in Florida

It took longer then expected to receive the documents from New York. If you have any questions, please call Usha Mistry at (813) 971-3750.

Thanking you.

Sincerely



Harshadrai V. Mistry



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

June 3, 2003

HARSHADRAI V. MISTRY
VIJAYDEV MISTRY FOUNDATION INC.
P.O. BOX 46877
TAMPA, FL 33647

SUBJECT: VIJAYDEV MISTRY FOUNDATION INC.
Ref. Number: W03000015651

We have received your document for VIJAYDEV MISTRY FOUNDATION INC. and your check(s) totaling \$96.25. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Are you wanting to just reserve your name (which is the form you have completed) or are you wanting to be authorized to do business in the State of Florida? If you are wanting to be authorized you have completed the wrong form, you will need to complete the attached form.

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

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing
Corporate Specialist

Letter Number: 403A00034642

n/p

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

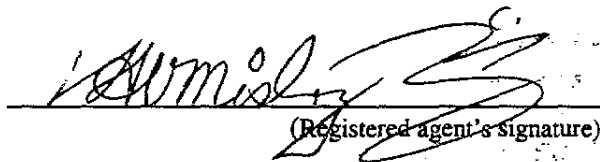
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. VIJAYDEV MISTRY FOUNDATION 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. NEW YORK STATE 3. 13-3440329
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 11/19/87 5. _____
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 4/1/03
(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. 1510 - 1526 EAST FOWLER AVENUE
(Principal office address)
P.O. Box 46877, Tampa FL 33647
(Current mailing address)
8. REAL ESTATE PROPERTY 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: HARSHADRAI V. MISTRY
Office Address: 16206 NOTTINGHAM PARK WAY
TAMPA, Florida 33647
(City) (Zip code)

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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:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: BHIKA RATANJEE

Address: 77 DARTMOUTH STREET

FOREST HILLS, NY 11375

Vice President: HARISHCHANDRA V. MISTRY

Address: 77 DARTMOUTH STREET

FOREST HILLS, NY 11375

Secretary: HARSHADRAI V. MISTRY

Address: 16206 NOTTINGHAM PARK WAY, TAMPA, FL. 33647

Treasurer: HARSHADRAI V. MISTRY

Address: 16206 NOTTINGHAM PARK WAY, TAMPA FL. 33647

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. CORPORATE SECRETARY & TREASURER

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

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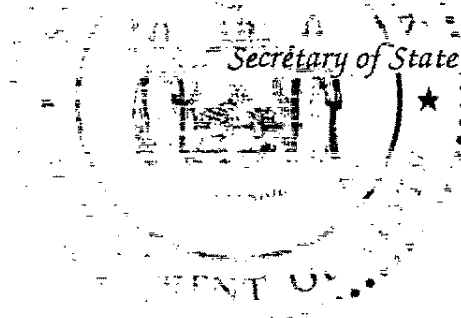
State of New York
Department of State | ss:

I hereby certify, that the Certificate of Incorporation of VIJAYDEV MISTRY FOUNDATION INC. was filed on 11/19/1987, as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 16th day of June
two thousand and three.*



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