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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (212) 431-5000
Fax Number : (212) 431-1441

DIVISION OF CORPORATION

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FOREIGN PROFIT QUALIFICATION

METROPOLE OF FLA, INC.

Certificate of Status	0
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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. METROPOLE OF FLA, 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 or country under the law of which it is incorporated)

3. being applied for

(FEI number, if applicable)

4. 9/2/2003

(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. 404 Jerusalem Avenue, Hicksville, NY 11801

(Principal office address)

(Current mailing address)

8. own and operate a night club

(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: BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.

Office Address: 4435 Old Winter Garden Road

Orlando

(City)

Florida

32811

(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.

J M T

(Registered agent's signature)

ASST SECY

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.

BLUMBERGEXCELSIOR

62 WHITE ST

NY NY 10013

800-221-2972 x575

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: MICHAEL VAN CLIEF AULT

Address: 404 JERUSALEM AVENUE, HICKSVILLE, NY 11801

Director: _____

Address: _____

B. OFFICERS

President: MICHAEL VAN CLIEF AULT

Address: 404 JERUSALEM AVENUE, HICKSVILLE, NY 11801

Vice President: _____

Address: _____

Secretary: MICHAEL VAN CLIEF AULT

Address: 404 JERUSALEM AVENUE, HICKSVILLE, NY 11801

Treasurer: MICHAEL VAN CLIEF AULT

Address: 404 JERUSALEM AVENUE, HICKSVILLE, NY 11801

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

13. Michael Van Clief Ault
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)14. MICHAEL VAN CLIEF AULT, PRESIDENT
(Typed or printed name and capacity of person signing application)

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**State of New York } ss:
Department of State**

I hereby certify, that the Certificate of Incorporation of METROPOLE OF FLA, INC. was filed on 09/02/2003, with perpetual duration, 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.

I further certify, that no other documents have been filed by such Corporation.



Witness my hand and the official seal
of the Department of State at the City
of Albany, this 08th day of September
two thousand and three.

Secretary of State

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