1 of 1

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone

: (305)634-3694

Fax Number : (305)633-9696

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 16, 2004

CARIBBEAN CENTER S.A. (CORP)

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6020.

Tammi Cline Document Specialist FAX Aud. #: Letter Number: 204A00002970



APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

/	AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
1	N COMPLIANCE WITH SECTION 607.1603, FLORIDA STATUTES, THE FOLLOWING IS SUB- MITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1	(Name of corporation: the word "INCORPORATED," "COMPANY," or "CORPORATION" or words or abbreviations of like import in language, as will clearly indicate that it is a corporation
Î	nstead of a natural person or partnership if not so contained in the name at present.)
	HAITI
	(State or country under the law of which it is incorporated)
;	(Date of Incorporation) 4. LER PETUAL (Duration)
	·
:	(Federal Employer Identification number, if applicable)
	"UPON QUALIFICATION"
	(Date first transacted business in Florida. See sections 607.1501, 607.1502, and 817.155, F.S.)
,	QUITE MAIN SET DR SUITE Q49 hiani FC 33/73
	8. BUSINESS DEBLING ANY KIND OF PREATION FERTAINING to HONEY (Brief description of the nature of the business in which it is engaged in the state of Florida)
	TRANSMITTER SENDING - RECEIVING PACKAGE act.
	9. Names and addresses of officers and or directors:
	A. Directors:
	Chairman: TULES PIERRE DIERICKX SK
	Address: DELMAS 60 RUE COUTILIEN INVASSE FLEUPY # 4
	PONT-AU-PRINCE HOLTI
	Vice Chairman: PASCAL DLERICKY
	Address: 18 TURTLE WALK KEY BISCAYNE
	MIANI FC 33/49
	Director: Talles PIERRE DIERICKA IR
	Address: 9615 SW 118 About
	MIANI FC. 33/76
	Director:
	Address:

B. Officers:
President: JULES PLERRE DIERICKX SR
Address: DELMAS 60, RUE CONTILIEN INPASSE FLEURY # 4
The state of the s
Vice President: PASCAL DIFRICKX
Address: 18 TURTLE WALK KEY BIRCAYNE
MIAHI FC 33149
Secretary: JULES PIERRE DIERICKX JR
Address: 9615 SQU 118 Street
MIAHI FL 33176
Treasurer:
Address:
(If needed, you may attach an addendum to the application listing additional officers and/or
(If needed, you may attach an addendum to the application listing additional officers and/or () = directors.)
10. Name and Street address of Florida registered agent;
and the second s
Name: 1145CAC DIERICKX
Name: <u>AASCAL</u> <u>DIERICK</u> X Office Address: <u>94255</u> DUN SET <u>DRIVE</u> SUITE 249
Office Address: 9425 SW DUNSET DRIVE SWITE 249
Office Address: 94255N BUNSET DRIVE SWITE 249 HIBMI ,Florida EL 3.3173 Zip Code
Office Address: 94255D SUNSET DRIVE SUITE 249_ HIBHI Florida FL 33173 Zip Code
Office Address: 942550 SUNSET DRIVE SUITE 249 HIBHI , Florida EL 3.3/73 Zip Code 11. Registered agent's acceptance:
Office Address: 942550 30N SET DRIVE SUITE 249 HIBHU ,Florida EL 3.3/73 Zip Code 11. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above
Office Address: 942.5 S.D. SUN SET DRIVE SUITE 249 H. B.H
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Office Address: 942.5 S.D. SUN SET DRIVE SUITE 249 H. B.H
Office Address: 942.55.0 30 N SET DRIVE SUITE 249 H. B.H. J.
Office Address: 942.5 S.D. SUN SET DRIVE SUITE 249 H. B.H
Office Address: 942.5 S.D. SUN SET DRIVE SUITE 249 H. H.H. J. Florida F. J. 3.3/33 Zip Code 11. 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 futher 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.
Office Address: 942.55.0 SUN SET DRIVE SUITE 249 H. B.H. Plorida EL 3.3/33 Zip Code 11. 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 futher 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. 12. 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
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MINISTRY OF THE ECONOMY AND FINANCE [HAITI]
Directorate-General of Taxation

TAX COMPLIANCE CERTIFICATE "A"

QUITTANCE

The Directorate-General of Taxation, represented by its Director-General, John E. DESROGERS, certified under No. 003-101-939-5, hereby certifies and attests that the business enterprise CARIBBEAN CENTER S.A., identified by tax identification No. NIF 000-57-598, and holder of approval No. 811-73-863, enrolled with the Directorate-General of Taxation, is in compliance with the tax laws of the Republic of Haiti.

This certificate is valid for the period from November 26, 2002 until (see below).

In attestation whereof, the present certificate is issued for the purposes and to the effects provided for by law, for customs transactions only.

Issued in Port-au-Prince on November 26, 2002

[Signature]:
Rony A.A. JOSEPH
Authorized Signature
[Seal]

Louis Agner JEAN-CHARLES
Tax identification No. NIF 003-023-352-0

First period of validity from November 26, 2002 to February 26, 2003

[Signature]:

Rony A.A. JOSEPH

In charge of UGCF [Tax Oversight and Management Unit]

Second period of validity from February 27, 2003 to May 27, 2003

[Signature]:

Rony A.A. JOSEPH

In charge of UGCF

Third period of validity from June 12, 2003 to September 12, 2003

[Signature]:

Rony A.A. JOSEPH

In charge of UGCF

Hold Translations

TEL 209-576-4650 - FAX 906-373-4982 nokitten@balgouih.net ZE : PT PBBZ-91-NUL Fourth period of validity from November 3, 2003 to February 3, 2004

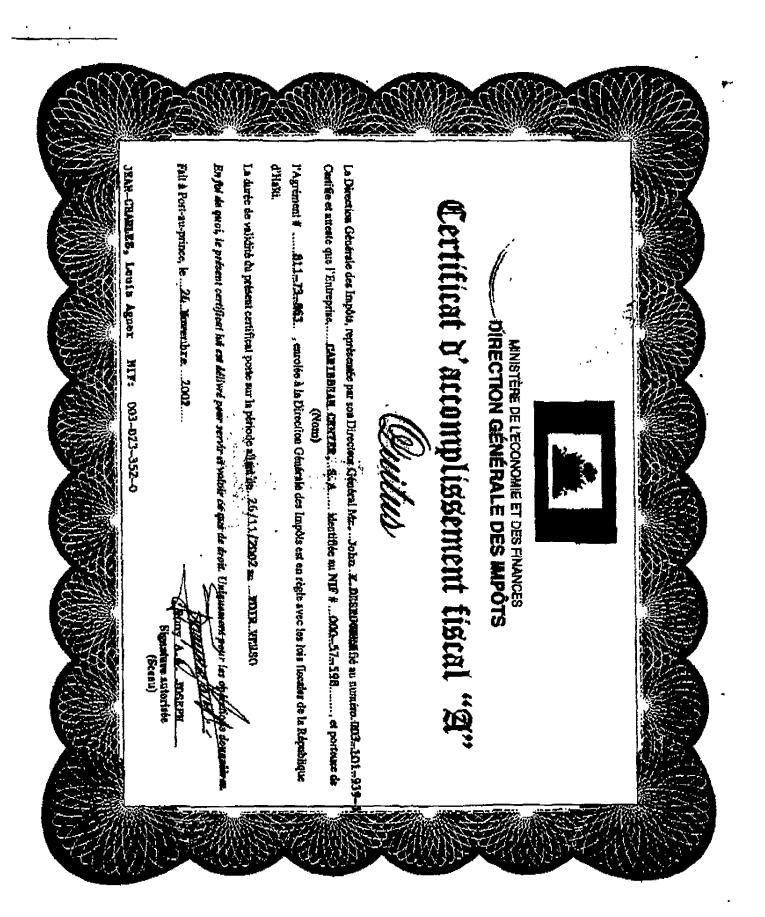
[Signature]: Rony A.A. JOSEPH In charge of UGCF

I, on behalf of Hold Translations, certify that the above translation we made from French is correct and that we are qualified to make it.

Paulina Grace, Notary Public, State of Florida Miami, Florida, December 17, 2003

DE24





3200 VAL.: DU 12 JUIN 2003 AD 12 SEFTEMBRE 2003

ARME VAL. : DE CO ROWERDER 2003 AU 03 PETELER 2004

2755 YAJ..: BU 27 FEVRIKU 2003 AU 27 MAI 2003

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