

F0400000009149Florida 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.

(((H04000036751 3)))

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 : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 222-9428APPROVED
AND
FILED
04 FEB 19 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDARECEIVED
04 FEB 19 PM 4:12
DIVISION OF CORPORATION

FOREIGN PROFIT QUALIFICATION

220 Alhambra Investments Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing

Public Access Help

JB
2-20-04

**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. 220 Alhambra Investments Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Canada 3. N/A
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. January 21, 2004 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. 1130 Sherbrooke Street West, Suite 300, Montreal, Quebec H3A 2M8
(Principal office address)

Same as above.
(Current mailing address)

8. To engage in any lawful act or activity for which corporations may be organized under the Canada Business Corporations Act.
(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

C T Corporation System

By: Connie Bryan

(Registered agent's signature)

CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY

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:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 FEB 19 AM 8:50

APPROVED
AND
FILED

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Joseph Kracauer

Address: 1130 Sherbrooke Street West, Suite 300, Montreal, Quebec H3A 2M8

Director: _____

Address: _____

B. OFFICERS

President: Joseph Kracauer

Address: 1130 Sherbrooke Street West, Suite 300, Montreal, Quebec H3A 2M8

Vice President: _____

Address: _____

Secretary: Joseph Kracauer

Address: Same as above.

Treasurer: Joseph Kracauer

Address: Same as above.

04 FEB 19 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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

13.  _____
(Signature of Director or Officer listed in number 12 of the application)

14. Joseph Kracauer, President, Secretary and Treasurer
(Typed or printed name and capacity of person signing application)



Industry Canada

Industrie Canada

CERTIFICATE OF COMPLIANCE
s. 263.1 (1)(a)(b)

CERTIFICAT DE CONFORMITÉ
art. 263.1 (1)(a)(b)

220 ALHAMBRA INVESTMENTS INC.

INVESTISSEMENTS 220 ALHAMBRA INC.

421819-1

Name of corporation-Dénomination sociale

Corporation number-Numéro de la société

I HEREBY CERTIFY that the corporation named above is incorporated or continued under the *Canada Business Corporations Act*, is not discontinued and has not been dissolved under that Act.

JE CERTIFIE, par les présentes, que la société ci-dessus mentionnée est constituée ou prorogée en vertu de la *Loi canadienne sur les sociétés par actions*, qu'elle n'a pas changé de régime et qu'elle n'a pas été dissoute en vertu de cette Loi.

This corporation has sent to the Director the required Annual Returns and has paid all fees required under the Act.

Cette société a remis au directeur les rapports annuels prescrits et acquitté les droits requis par la Loi.

Deputy Director - Directeur adjoint

February 18, 2004 / le 18 février 2004

Issuance date - Date d'émission

Canada