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CORPORATION SERVICE COMPANY™

04 MAR 11 PM 3:58  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 0721000000032  
REFERENCE : 484197 5018754  
AUTHORIZATION : *Patricia Pigute*  
COST LIMIT : \$ 70.00

ORDER DATE : March 9, 2004

ORDER TIME : 10:28 AM

ORDER NO. : 484197-005

CUSTOMER NO: 5018754

CUSTOMER: Amedeo Luongo  
Mendonca & Suarez L.L.C.  
505 North Broad Street

Elizabeth, NJ 07208

FOREIGN FILINGS

NAME: VMV CONSTRUCTION, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER: \_\_\_\_\_

**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.

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1. **VMV Construction, 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. **New Jersey**

(State or country under the law of which it is incorporated)

3. **22-3735814**

(FEI number, if applicable)

4. **5/17/2000**

(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. **58 Pine Crest Lane, Palm Coast, FL 32164**

(Principal office address)

**58 Pine Crest Lane, Palm Coast, FL 32164**

(Current mailing address)

8. **To operate a construction company and any lawful activity for which corporations may be organized.**

(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: **Milma Gomes**

Office Address: **58 Pine Crest Lane**

**Palm Coast**

(City)

, Florida **32164**

(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.*

  
(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: Milma Gomes

Address: 58 Pine Crest Lane

Palm Coast, FL 32164

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Milma Gomes

Address: 58 Pine Crest Lane

Palm Coast, FL 32164

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Milma Gomes

Address: 58 Pine Crest Lane, Palm Coast, FL 32164

Treasurer: Milma Gomes

Address: 58 Pine Crest Lane, Palm Coast, FL 32164

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

13. \_\_\_\_\_

Milma Gomes  
(Signature of Director or Officer listed in number 12 of the application)

14. \_\_\_\_\_

Milma Gomes President

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

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

VMV CONSTRUCTION, INC.  
0100817292

*I, the Treasurer of the State of New Jersey,  
do hereby certify that the above-named  
New Jersey Domestic Profit Corporation was  
registered by this office on May 17, 2000.*

*As of the date of this certificate, said business  
continues as an active business in the State of New  
Jersey. Annual Reports are outstanding for the  
following year(s):*

*2001*

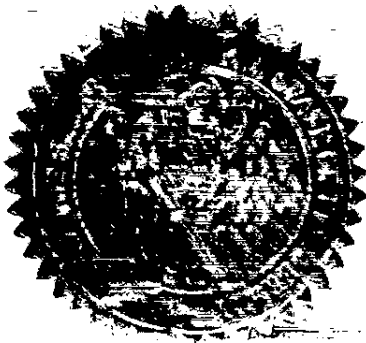
*I further certify that the registered agent and  
registered office are:*

*Milma F Gomes  
548 Ferry Street  
Newark, NJ 07105 0000*

*Continued on next page . . .*

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

VMV CONSTRUCTION, INC.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
10th day of March, 2004

A handwritten signature in cursive script, reading "John E. McCormac".

John E McCormac, CPA  
State Treasurer