

FD4000002481

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

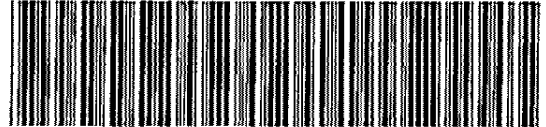
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

637-047

~~WOL-13223~~

Office Use Only



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03/29/04--01071--017 \*\*78.75

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04 APR -4 PM 3:51  
SECRETARY OF THE  
TALLAHASSEE COUNTY

5-504



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

April 20, 2004

JOSEPH PATERNOSTRO  
901 N.E. 125TH ST, STE. 101  
NORTH MIAMI, FL 33161

SUBJECT: ANGELIC DREAMZ, INC.  
Ref. Number: W04000013223

We have received your document for ANGELIC DREAMZ, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

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.

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) 245-6025.

Trevor Brumbley  
Document Specialist

Letter Number: 004A00026096

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 MAY -4 PM 3:55

AND  
FILED



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

April 6, 2004

JOSEPH PATERNOSTRO  
901 N.E. 125TH ST, STE. 101  
NORTH MIAMI, FL 33161

SUBJECT: ANGELIC DREAMZ, INC.  
Ref. Number: W04000013223

We have received your document for ANGELIC DREAMZ, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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.

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) 245-6025.

Trevor Brumbley  
Document Specialist

Letter Number: 904A00022340

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 MAY 11 PM 3:56

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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ANGELIC DREAMZ, INC.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

JOSEPH PATERNOSTRO ACCOUNTING SERVICES, INC.  
(Name of Person)

JOSEPH PATERNOSTRO ACCOUNTING SERVICES, INC.  
(Firm/Company)

901 N.E. 125TH STREET, SUITE 101  
(Address)

NORTH MIAMI, FLORIDA 33161  
(City/State and Zip code)

For further information concerning this matter, please call:

JOSEPH PATERNOSTRO at ( 305 ) 895-7355  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☒ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

04 MAY -4 PM 3:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
AND  
FILED

**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. ANGELIC DREAMZ, INC.

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

ANGELIC DREAMZ, INC.

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

2. DELAWARE

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

3. 65-0510781

(FEI number, if applicable)

4. JUNE 30, 1994

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. JANUARY 01, 2004

(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. 12000 NE 8TH AVENUE, BISCAYNE PARK, FL 33161

(Principal office address)

901 NE 125TH STREET, SUITE 101, NORTH MIAMI, FL 33161

(Current mailing address)

8. RETAIL SALES

(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: TIMOTHY HOFFMAN

Office Address: 12000 NE 8TH AVENUE

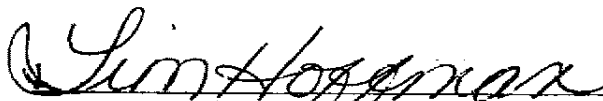
BISCAYNE PARK, , Florida 33161

(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.*

  
(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:

FILED  
04 MAY -4 PM 3:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**A. DIRECTORS**

Chairman: TIMOTHY HOFFMAN  
Address: 12000 N.E. 8TH AVENUE  
BISCAYNE PARK, FL 33161

Vice Chairman: TIMOTHY HOFFMAN  
Address: 12000 N.E. 8TH AVENUE  
BISCAYNE PARK, FL 33161

Director: TIMOTHY HOFFMAN  
Address: 12000 N.E. 8TH AVENUE  
BISCAYNE PARK, FL 33161

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

**B. OFFICERS**

President: TIMOTHY HOFFMAN  
Address: 12000 N.E. 8TH AVENUE  
BISCAYNE PARK, FL 33161

Vice President: TIMOTHY HOFFMAN  
Address: 12000 N.E. 8TH AVENUE  
BISCAYNE PARK, FL 33161

Secretary: TIMOTHY HOFFMAN  
Address: 12000 N.E. 8TH AVENUE, BISCAYNE PARK, FL 33161

Treasurer: TIMOTHY HOFFMAN  
Address: 12000 N.E. 8TH AVENUE, BISCAYNE PARK, FL 33161

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

13. *Tim Hoffman*  
(Signature of Director or Officer listed in number 12 of the application)

14. TIMOTHY HOFFMAN  
(Typed or printed name and capacity of person signing application)

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04 MAY - 6 PM 3P 56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ANGELIC DREAMZ INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF APRIL, A.D. 2004.



2414023 8300

040303896

*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3075481

DATE: 04-27-04