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(City/State/Zip/Phone #)

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(Document Number)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

W05-883
J. BRYAN JAN - 6 2005

J. BRYAN FEB - 1 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 5TH AVENUE FINANCIAL GROUP, 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:

ALAN HAFT
(Name of Person)

5TH AVENUE FINANCIAL GROUP, INC.
(Firm/Company)

19306 SKYRIDGE CIRCLE
(Address)

BOCA RATON, FL 33498
(City/State and Zip code)

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 TALLAHASSEE, FLORIDA
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For further information concerning this matter, please call:

ALAN HAFT at (941) 633 9698
(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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

January 6, 2005

ALAN HAFT
5TH AVENUE FINANCIAL GROUP, INC.
19306 SKYRIDGE CIRCLE
BOCA RATON, FL 33498

SUBJECT: 5TH AVENUE FINANCIAL GROUP, INC.
Ref. Number: W05000000883

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for 5TH AVENUE FINANCIAL GROUP, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence from the same office that provided you with the certified copy.

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) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 305A00001086

MEMORANDUM

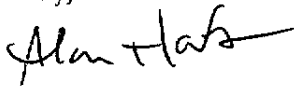
TO: JOEY BRYAN, FL DEPARTMENT OF STATE
FROM: ALAN HAFT
SUBJECT: CERTIFICATE OF STATUS
DATE: 1/26/2005
CC:

Regarding the letter from you enclosed, please find a copy of your letter along with the Certificate of Status Domestic Corporation.

I believe this will satisfy my filing requirements. Please let me know otherwise. I look forward to hearing back from you soon.

Thank you.

Sincerely,



ALAN HAFT

For 5th Avenue Financial Group

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DIVISION OF CORPORATIONS
ALLAHASSEE, FLORIDA

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. 5TH AVENUE FINANCIAL GROUP, 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. ORANGE COUNTY CA 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1/25/03 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. STARTING JAN 15, 2005
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 19306 SKYRIDGE CIRCLE
(Principal office address)

Boca Raton, FL 33498
(Current mailing address)

8. FINANCIAL SERVICES
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

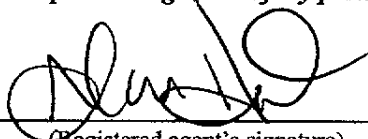
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: ALAN HART

Office Address: 5355 TOWN CENTER ROAD, STE 702

Boca Raton, Florida 33486
(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:

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DEPARTMENT OF CORPORATIONS
TALLAHASSEE, FLORIDA
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A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. OFFICERS

President: ALAN HAFT

Address: 19306 SKYRIDGE CIRCLE

BOCA RATON FL 33498

Vice President: _____

Address: _____

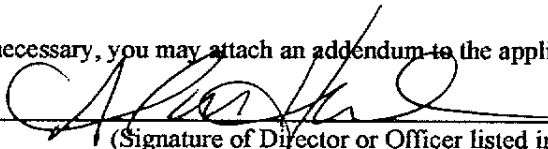
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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. ALAN HAFT PRESIDENT, SECRETARY & TREASURER

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

State of California

SECRETARY OF STATE

CERTIFICATE OF STATUS DOMESTIC CORPORATION

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

I, KEVIN SHELLEY, Secretary of State of the State of California, hereby certify:

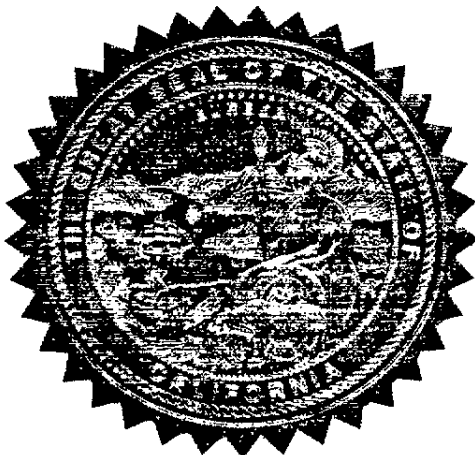
That on the **15th day of January, 2003**, **5TH AVENUE FINANCIAL GROUP, INC.** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of January 20, 2005.



Kevin Shelley
KEVIN SHELLEY
Secretary of State

ts