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SECRETARY OF STATEMENT ALLAHASSETS, FLOCI

TRANSMITTAL LETTER

TO:	Registration Se Division of Co			
SUBJ	IECT:	Harve	ey I. Bezozi, CPA, P.C.	
~~~		(Name of co	orporation - must include suffix	)
Dear S	Sir or Madam:			
"Certi		ce," and check are submi	ation for Authorization to Transaitted to register the above refere	
Please	return all corres	pondence concerning thi	is matter to the following:	
		Harvey I.	Bezozi, CPA - President	
		()	Name of Person)	···
		Harvey	I. Bezozi, CPA, P.C.	
		(1	Firm/Company)	
		380 SE M	fizner Blvd, Suite 1722	
			(Address)	
		Boca	Raton, FL 33432	
		(Cit	ty/State and Zip code)	ALL ALL
For fu	rther information	n concerning this matter,	please call:	2005 MAR -9 SECRETARY O
Harve	y I. Bezozi. CPA	- President at (_	561 ) 929-1288	T F
	(Name of Pers	son)	(Area Code & Daytime Telepl	none Number
	STREET ADI Registration So Division of Co 409 E. Gaines Tallahassee, F.	ection orporations St.	MAILING A Registration of C P.O. Box 632 Tallahassee,	Section Corporations 27
Enclos	sed is a check for	r the following amount:		
<b>57</b> (	0.00 Filing Fee	☐ \$78.75 Filing Fee Certificate of State		

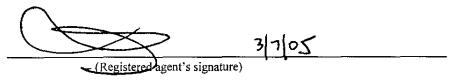
## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.	Harvey I. Bez	ozi, CPA, P.C.					
		poration: must include "INCORPORA" p," "Inc," "Co," or "Corp.")	ΓED,"	"COMPANY," "CORPORATION,"			
	(16	Liu Florido enten alternata comprete		adopted for the purpose of transacting business in Florida)			
	•	le in i fortda, effier afternate corporate i	iame a	•			
2.	New Jersey		_ 3.	22-3402776			
	(State or country un	der the law of which it is incorporated;		(FEI number, if applicable)			
4.	11/29/1994		_ 5.	Perpetual			
	(Date o	fincorporation)		(Duration: Year corp. will cease to exist or "perpetual")			
6.	N/A						
				Florida, if prior to registration) 02, F.S., to determine penalty liability)			
7.	380 SE Mizner	Blvd, Suite 1722					
		(Principal office	addr	ess)			
	Boca Raton, F	L 33432					
		(Current mailing	g addr	ess)			
8.	Certified Publi	c Accountant		2100 TALL			
	(Purpose(s) o	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)					
9.	Name and street a	address of Florida registered agent:	(P.O	Box NOT acceptable)			
	Name:	Harvey I. Bezozi					
O:	ffice Address:	380 SE Mizner Blvd, Suite 1722		- 33432			
		Boca Raton		, Florida 33432			
	,	(City)		(Zip code)			

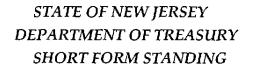
10. Registered agent's acceptance:

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.



- 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. DIREC	CTORS			
Chairman;	Harvey I. Bezozi, CPA			
Address:	380 SE Mizner Blvd, #1722			
_	Boca Raton, FL 33432			
Vice Chairn	nan:	<u></u>		
Address:				
Director: _				
Address:				
Director: _				
Address:				
B. OFFIC	PERS			
President:	Harvey I. Bezozi, CPA	=-		
Address:	380 SE Mizner Blvd, #1722	SECH	2005	
	Boca Raton, FL 33432	SVH)	MAR	
Vice Preside	ent:	318	÷	income income in
		70	Ū	J
		三三		
Secretary:				
NOTE: If	necessary, you may attach an addendum to the application listing additional officers a	ınd/or d	irectors	,
13	(Signature of Director of Officer listed in number 12 of the application)		3(7)	25
1.4	(Signature of Director of Officer fisted in humber 12 of the application)  Harvey I. Bezozi, CPA - President			
14	(Typed or printed name and capacity of person signing application)			



## HARVEY I. BEZOZI, CPA, P.C.

100607761

With the Previous or Alternate Name

TAX HELP ASSOCIATES OF THE TRI-STATE AREA, P.C.

(Previous Name)

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Professional Corporation was registered by this office on November 29, 1994.

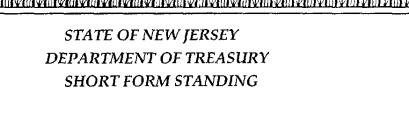
As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

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

Corporation Service Company 830 Bear Tavern Rd West Trenton, NJ 08628

Continued on next page . . .

SECRETARY OF STATE



HARVEY I. BEZOZI, CPA, P.C.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this

25th day of February, 2005

Johne Elemen

John E McCormac, CPA State Treasurer SECRETARY OF SINTE