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(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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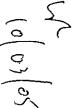




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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: HOME CAFE, 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:	
Ronald E. Lyons	9 (ZIII
(Name of Person)	
Samek, McMillan & Metro, P.C.	Π
(Firm/Company)	Marie Control
1901 Research Boulevard, Suite 500	
(Address)	
Rockville, Maryland 20850	
(City/State and Zip code)	
For further information concerning this matter, please call:	
Ronald E. Lyons at (301) 251-1180	
(Name of Person) (Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations 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 & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy Certified Copy Certified Copy	

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.	HOME CAFE	≐, INC.		100 100 110			_	,	
		orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED," "CO	MPANY,	" "CORPORA	TION,"			
	(If name unavaila	ble in Florida, enter alternate corporate n	me adopte	d for the r		sacting busine	ess in Floric		— ::·
	New York	-	-	166652	•				
	(State or country v	under the law of which it is incorporated)			(FEI number, it	f applicable)			
4.	April 16, 19	93	5. Per	petual	<u></u>				
	(Date	of incorporation)	(Dura	ation: Yea	ar corp. will cea	ise to exist or	"perpetual	")	
6.	On or after	October 1, 2005		• • <u></u> . 	e i segen i sego per e	<u> </u>			2
		(Date first transacted busine (SEE SECTIONS 607.1501 & 60						0	
7.	400 Holiday	y Court, Suite 205, Warrer				• •	SECT	3S SE	
		(Principal office		_*			王	0	CONTRACTOR.
	400 Holida	y Court, Suite 205, Warr	nton,	Virgini	a 20186		N.F.Y	26	Samuel and
		(Current mailing	address)				E S	PH	
8.		t and Food Service Opera			-		FLORE STA	2: 19	
	(Purpose(s)	of corporation authorized in home state	r country	to be carri	ed out in state of	of Florida)	A		
9.	Name and street	t address of Florida registered agent:	P.O. Box	NOT ac	ceptable)				
	Name:	Trevor Streeter			<u></u>		·		
Ot	ffice Address:	13131 Highland Glen Wa	y East		er A				
		Jacksonville	_	Florida	32224				***
		(City)		, - 101144 _	(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: Trevor Streeter	<u> </u>	<u></u>
Address: 13131 Highland Glen Way East		<u></u>
Jacksonville, Florida 32224		_
Vice Chairman: Winston Streeter		
Address: P.O. Box 115		
Goldvein, Virginia 22720		
Director:		
Address:		···
	- 	<u> </u>
Director:	SE SE	
Address:	26	
	mo P	M
B. OFFICERS	2: 1 STA FLOR	J
President: Trevor Streeter	6	
Address: 13131 Highland Glen Way East	·····	<u></u>
Jacksonville, Florida 32224		
Vice President:	17 1 10 1	
Address:		<u></u>
		
Secretary: Winston Streeter	· _ 	
Address: 400 Holiday Court, Suite 205, Warrenton, Virginia 20186		
Treasurer:	·	<u></u>
Address:		<u> </u>
NOTE: If necessary, you may attach an addendum to the application listing additional officers an	id/or directors.	
13. (Signature of Director or Officer listed in number 12 of the application)		·
14. Trevor Streeter, President and Chairman of the Board		

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

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of HOME CAFE, INC. was filed on 04/16/1993, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 06th day of Septembertwo thousand and five.

Secretary of State

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