F05000006466

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 4, 2004

FRANCIS SADIQ P.O. BOX 48366 TAMPA, FL 33647

SUBJECT: FIVE STAR, INC. Ref. Number: W04000004854

We have received your document for FIVE STAR, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of aname 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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 704A00007526

SECRETÁRY OF STATE CONFORATION



TO: Registration Section Division of Corporations		
SUBJECT: FIVE 57	TARS, INC.	
(Name of corporation	n - must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to r transact business in Florida.		
Please return all correspondence concerning this matter	to the following:	
FRANCIS SADIR		
FRANCIS SADIO (Name of	Person)	
Five Stars Inc. (Firm/Co P. O. Box 48366 (Addi		
(Firm/Co	mpany)	
P.O. Box 48366		
(Add	ress)	
Tampa FL 33647	7	÷
(City/State	7 and Zip code)	10 10 N
For further information concerning this matter, please call:		
_		IARY OF STATE
(Name of Person) at (8/3)	, 4/1-0423	
(Name of Person) (Area Code & Daytime Telephone Number)		
		NO NO
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	Œ
Division of Corporations	Division of Corporations	
409 E. Gaines St. Tallahassee, FL 32399	P.O. Box 6327 Tallahassee, FL 32314	
Tananassee, FL 32399	rananassee, PL 52514	
Enclosed is a check for the following amount:	,	
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ Certificate of Status	\$78.75 Filing Fee & \$87.50 Filing Certified Copy Certificate o	f Status &

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. FIVE Stars, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," Five Stars Creation Inc
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated)

3. 20-0524371

(FEI number, if applicable) 4. 12/15/03 5. Perhetual (Duration: Year corp. will cease to exist or "perpetual") (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.) P. O. Box 48366 Tampa FC 33647

(Principal office address) P. O. Box 48366 Tampa, Fl. (Current mailing address) 8. Resturant giftshop and E-commerce (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: FRANCIS SADIQ Office Address: 8405 PINE Thrush way <u>Tampa</u>, Florida <u>3364</u> 7
(City) (Zin 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 eccept 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. DIRECTORS

Chairman:		
Address:		
Vice Chairman:	7	
Address:		
Director:		
Address:		
Director:		
Address:		
B. OFFICERS	04 F	SEC SEC
President: FRANCIS SADIO		
Address: P.O. BOX 48366	5	
Tampa EL 33647	?	<u> </u>
Vice President: Novem Sadiq	£ 13 ***	AIS
Address: P.O. BOX 48366		र्गाम
Tampa, FL 33647		
Secretary:		
Address:		
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the application list	ting additional officers and/or directors.	
13. Single of Division of Office listed in number 19 of the	the application)	
(Signature of Director or Officer listed in number 12 of t		
14. FRANCIS SADIQ (P. (Typed or printed name and capacity of person s		

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FIVE STARS, 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 SIXTEENTH DAY OF JANUARY, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FIVE STARS, INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF DECEMBER, A.D. 2003.

H

Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 2875989

DATE: 01-16-04

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