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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
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Certified Copies Certificates of State	ıs
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Special Instructions to Filing Officer:	
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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: TEACREST CORPORATION
(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:
MAURICE C. HAKIM (Name of Person)
· · · · · · · · · · · · · · · · · · ·
TEACREST CORPORATION
(Firm/Company)
5776 LADY LUCK ROAD FIELD
PALM Beach GARDONS FL 33418
(City/State and Zip code)
For further information concerning this matter, please call: CORGE ROBERTS at (561) 848 - 0/66 (Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Enclosed is a check for the following amount: 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 \$\Begin{array}{cccccccccccccccccccccccccccccccccccc

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE V REGISTER A FORE	VITH SECTION 607.1503, FLORIDA IGN CORPORATION TO TRANSAC	A STATUTES, TH T BUSINESS IN	'E FOLLOWING IS SUBMI THE STATE OF FLORIDA	第 不
I. TEAC	REST CORPOR	MOTTA)	TO 28 FILE
"Inc.," "Co.," "Cor	poration; must include "INCORPORATE p," "Inc," "Co," or "Corp.")	ED, COMPAN	, "CORPORATION,	SKY THE
(If name unavailab	le in Florida, enter alternate corporate na	me adonted for the	nurnose of transacting husine	ess in Florida
· .	-		3776693	35 III 1 1011 9 (2)
	der the law of which it is incorporated)		(FEI number, if applicable)	
4. 6/1	0 /94	5. Pers	PETUAL	
(Date o	f incorporation)	(Duration: Y	ear corp. will cease to exist or	"perpetual")
6.	11/05	·		
	(Date first transacted busines (SEE SECTIONS 607.1501 & 60'	ss in Florida, if pri 7.1502, F.S., to det	or to registration) termine penalty liability)	
₇ 5776	LADY LUCK RO			NS. FL 33418
	(Principal office a	address)	_	
POB	OX 53255 (Current mailing)	MAlun	Beach GARDE	205 FL 3342C
	(Current maining	aggress)		
	eting of botton T		·	<u> </u>
(Purpose(s)	of corporation authorized in home state o	or country to be car	ried out in state of Florida)	
9. Name and street	address of Florida registered agent: ((P.O. Box NOT	acceptable)	
Name:	MAURICE C. HAKIM	·	_ •	:
Office Address:	5776 LADY LUCK	ROAD		
	Palm Beneh GARDENS	Florida	33418	
	(City)		(Zip code)	· -
designated in this a further agree to co	ent's acceptance: If as registered agent and to accept se If a pplication, I hereby accept the appoince If a provisions of all statute If and accept the obligations of my	intment as regist es relative to the	ered agent and agree to act proper and complete perfo	t in this capacity. I
	Manica III	1		

- 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: MAURICE C. HAKIM	
Address: 5776 LADY LUCK ROAD	<u></u>
Palm Beach GARDENS FL 33418	
Vice Chairman:	
Address:	2011
	長 る 九
Director: Herbert S. STein	28 P
Address: 195 Birchuson PARK DRIVE	PA L: 5
Jericha NY 11753	TOX II
Director:	OP.
Address:	
Address.	
B. OFFICERS President: MAURICE C. HAKIM Address: S776 LADY LUCK ROAD PB6, FL 33418	
Vice President:	
Address:	
Secretary: Herbert S. Steini Address: 195 Birchwood PARK Deine Tenasurer: 1753	-
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers at 13. (Signature of Director or Officer listed in number 12 of the application)	nd/or directors.
14. (Typed or printed name and capacity of person signing application)	
(1) ped of princed name and capacity of person signing apprearion)	

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TEACREST CORPORATION" 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-FIRST DAY OF NOVEMBER, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TEACREST CORPORATION" WAS INCORPORATED ON THE TENTH DAY OF JUNE, A.D. 1994.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

FILED

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DIVISION : CORPORATIONS

TAIL ANASSEF FLORIDA



Warriet Smith Windson

AUTHENTICATION: 4312431

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DATE: 11-21-05