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(Requestor's Name)	
(Address)	
(Address)	
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(City/State/Zip/Phone #)	<u> </u>
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
CONTINUE SOPRES	
Special Instructions to Filing Officer:	P
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COVER LETTER

TO: Registration Section Division of Corporations	·
SUBJECT: DRA GAD INC	·
(Name of corporation - mus	t include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authori "Certificate of Existence," and check are submitted to register to transact business in Florida.	
Please return all correspondence concerning this matter to the f	following:
DORON GAS	The control of the co
(Name of Person))
DRA CAS (NC.	2000
(Firm/Company)	
15 West 47A SR. #802	-
(Address)	
NYC MY 10036	SECH FALLS
(City/State and Zip	code) R
·	SEE 3 F
For further information concerning this matter, please call:	HE SE
(Name of Person) at (Area Code &	302-7403 BAT ==
(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 P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
	5 Filing Fee & S87.50 Filing Fee, Ged Copy Certificate of Status & Certified Copy

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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 27, 2006

DORON GAD 15 WEST 47TH SR #802 NYC, NY 10036

SUBJECT: D R A GAD, INC. Ref. Number: W06000009593

We have received your document for D R A GAD, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the secretary of the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate 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) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 906A00013689

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. DER GAD, 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. NEW YORK 3. 13-3354969 (FEI number, if applicable)	
4. 2-15-86 (Date of incorporation) 5. Perpequel (Duration: Year corp. will cease to exist or "perpetual")	-
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
(Current mailing address) (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) (Principal office address) (Current mailing address) (Current mailing address) (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: Doron God	-
Office Address: 36 NE 1st Street, #331 Miami Florida, Florida 33132 (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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:		
A. DIRECTORS	• • •	
Chairman:		
Address:		
Vice Chairman:		
Address:		
Director:		
Address:		
	PASS AN	
Director:	APR -	-
Address:	## 3 ## 9 ## 9	
-	- S	
B. OFFICERS	¥d ±	
President: DORAD DAD	<u>C</u> (
Address: 19501 NE 15th GOLT NOATH MIAMI BEACH,	th	
	·	
Vice President:		
Address:		
	<u> </u>	
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. (Typed or printed name and capacity of person signing application)	· · · · · · · · · · · · · · · · · · ·	
(Typed of princed name and capacity of person signing application)		

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of D.R.A. GAD INC. was filed on 02/12/1986, 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.

**

The Biennial Statement is past due.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 22nd day of March two NE sthousand and six.

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puty Secretary of State

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