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(City, Citato Cipi, Notice II)
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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: WOMAN ON T	of luc.
(Name of corp	of IJC. oration - must include suffix)
Dear Sir or Madam:	
	n for Authorization to Transact Business in Florida," d to register the above referenced foreign corporation to
Please return all correspondence concerning this n	natter to the following:
SMAPAR DARY ROOS	
SMADAR DARY Rees (Na	me of Person)
WOMAN ON TOP INC.	
(Fin	m/Company)
(Name of the second of the sec	
	(Address)
FT. LAUDERDALE,	FLORIDA 33304
(City/S	State and Zip code)
For further information concerning this matter, ple	
DARY Rees at (9)	54, 990-4933
(Name of Person) (A	Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & S87.50 Filing Fee, 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.

(If name unavail	able in Florida, enter alternate co	orporate name adop	ted for the pur	oose of transacti	ng business in Florida)
•	1-1-4-4-4	•			
(State or country	VAVA DA under the law of which it is incor	rporated)	(FI	El number, if app	olicable)
J41	y82003	•	×		
(Date	y & 2003 of incorporation)		ration: Year c	orp, will cease t	o exist or "perpetual")
	×				
·	(Date first transact (SEE SECTIONS 607.1	501 & 607.1502.	S. to determi	ne nenalty liabil	ity)
//3	9 NE 17th WAY	FT. LAUDE	ROALE	FL 333	04
113	9 NE 17 TH WAY (Princip 9 NE 17 TH WAY (Curren	pal office address) FT. LAUDEKO nt mailing address)	PALE P	FL 3330	, 4
1/Hola	sdo of APT CICT :	to talk a Ho	(- A ~ A C	ORIES	
XI	of corporation authorized in ho at address of Florida registered		Nor	. 115	
			Nor	. 115	
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XI			Nor	. 115	
X1 1 .			Nor	. 115	
XI			Nor	. 115	
Name and street Name: Office Address:	MADAR DARY REES 1139 NE 17 TH WAY FT. LANDERDALE, F (City) gent's acceptance:	l agent: (P.O. Bo	x <u>NOT</u> accepton. , Florida	3330 4 Zip code)	08 JUL 10 PH 2:5
Name and street Name: Name: Office Address: O. Registered as laving been namelesignated in this wither agree to contact the contact that the contact the contac	MANAR DARY REES 1139 NE 17 TH WAY FT. LANDERDALE, F	accept service of the appointment all statutes relatives	x NOT acception. Florida	otable) Sip code) The above states agent and agree and comple	d corporation at the pee to act in this capa
Name and street Name: Office Address: O. Registered as laving been namesignated in this arther agree to contact the contact that the the contact th	MAGAR DARY REES 1139 NE 17 Magar FT. LANGEROOLE, F (City) gent's acceptance: ed as registered agent and to application, I hereby accept to omply with the provisions of a	accept service of the appointment all statutes relatives	x NOT acception. Florida	otable) Sip code) The above states agent and agree and comple	d corporation at the pee to act in this capa
Name and street Name: Office Address: O. Registered as daving been namelesignated in this further agree to contribute the contribute of	MAGAR DARY REES 1139 NE 17 Magar FT. LANGEROOLE, F (City) gent's acceptance: ed as registered agent and to application, I hereby accept to omply with the provisions of a	accept service of the appointment all statutes relatives	x NOT acception. Florida	otable) Sip code) The above states agent and agree and comple	d corporation at the pee to act in this capa

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.

. . . 3 A. DIRECTORS Address: 1139 NE 17 IN WAY FT. (AUPRADOLE FL 33304 Vice Chairman: SALA RUS WESTON FL 33326 Address: 863 Director: Address: **B. OFFICERS** President: SMADAR OARY LOES 17 I way FT. LAUDERDALE FL Vice President: Address: Secretary: SMADAR DARY RELS Address: 1139 JE 17 TH Way FT. CONDARDOL FL 33304 Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) SMADAR DARY Rees
(Typed or printed name and capacity of person signing application)

12. Names and business addresses of officers and/or directors:

SECRETARY OF STATE



08 JUL 10 PH 2:5

CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, WOMAN ON TOP INC. as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since July 8, 2003, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20080708-0517
You may verify this electronic certificate
online at http://secretaryofstate.biz/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 8, 2008.

ROSS MILLER Secretary of State