

F08000003479

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

637-734-647

\$1,150.00

W07-58974



700112067307

12/04/07--01045--002 **78.75

08/07/08--01004--009 **1150.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 AUG - 8 PM 4:15

8/08/08

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DIVISION OF CORPORATIONS

COVER LETTER

00 AUG -8 PM 4:15

TO: New Filing Section
Division of Corporations

SUBJECT: TPS INTERNATIONAL, 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:

HUBERT K. RAMPERSAD

(Name of Person)

TPS INTERNATIONAL, INC.

(Firm/Company)

3330 NE 190 STREET, SUITE 311

(Address)

AVENTURA, FL 33180

(City/State and Zip code)

For further information concerning this matter, please call:

HUBERT K. RAMPERSAD at (786) 537-7580
(Name of Person) (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
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☒ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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DIVISION OF CORPORATIONS

08 AUG -8 PM 4:15

December 5, 2007

HUBERT K. RAMPERSAD
3330 NE 190 STREET
SUITE 311
AVENTURA, FL 33180

SUBJECT: TPS INTERNATIONAL, INC.
Ref. Number: W07000058974

We have received your document for TPS INTERNATIONAL, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1,150.00.

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 records in the jurisdiction under 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 the corrected original and one copy of 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) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 707A00068601

**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. **TPS INTERNATIONAL, 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. **DELAWARE**

(State or country under the law of which it is incorporated)

3. **204175718**

(FEI number, if applicable)

4. **1/31/2005**

(Date of incorporation)

5. **perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6. **1/1/2006**

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **3330 NE 190 STREET, SUITE 311, AVENTURA, FL 33180**

(Principal office address)

3330 NE 190 STREET, SUITE 311, AVENTURA, FL 33180

(Current mailing address)

8. **INTERNATIONAL, LOCAL AND COUNTRYWIDE MANAGEMENT CONSULTING**

(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: **HUBERT K. RAMPERSAD**

Office Address: **3330 NE 190 STREET, SUITE 311**

AVENTURA

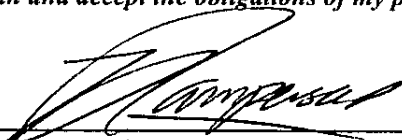
(City)

33180

(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.

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

A. DIRECTORS

Chairman: HUBERT K. RAMPERSAD

Address: 3330 NE 190 STREET, SUITE 311
AVENTURA, FL 33180

Vice Chairman: _____

Address: _____

Director: HUBERT K. RAMPERSAD

Address: 3330 NE 190 STREET, SUITE 311
AVENTURA, FL 33180

Director: _____

Address: _____

B. OFFICERS

President: HUBERT K. RAMPERSAD

Address: 3330 NE 190 STREET, SUITE 311
AVENTURA, FL 33180

Vice President: _____

Address: _____


Secretary: HUBERT K. RAMPERSAD

Address: 3330 NE 190 STREET, SUITE 311, AVENTURA, FL 33180

Treasurer: HUBERT K. RAMPERSAD

Address: 3330 NE 190 STREET, SUITE 311, AVENTURA, FL 33180

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. HUBERT K. RAMPERSAD
(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TPS INTERNATIONAL 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 NINTH DAY OF JANUARY, A.D. 2008.

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

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TPS INTERNATIONAL INC." WAS INCORPORATED ON THE THIRTY-FIRST DAY OF JANUARY, A.D. 2005.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3919524 8300

AUTHENTICATION: 6298914

080028742

DATE: 01-09-08