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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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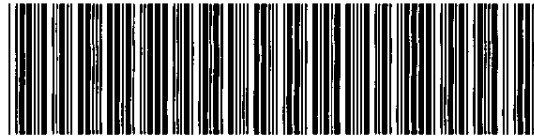
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
08 DEC -5 PM 2:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I. Burch DEC 5 2008 50000

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Tri-Com Systems 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:

John Harrison Sharbas

(Name of Person)

Tri-Com Systems Corporation

(Firm/Company)

6471 3rd Palm Point

(Address)

St. Pete Beach, Florida 33706

(City/State and Zip code)

For further information concerning this matter, please call:

John H. Sharbas

(Name of Person)

at (858) 518-2527

(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

**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. Tri - Com Systems Corporation

(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. California

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

3. 37-1531688

(FEI number, if applicable)

4. 10/13/2006

(Date of incorporation)

5. N/A

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

6. None

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 300 Carlsbad Village Dr. Suite # 108A 310 Carlsbad, CA 92008

(Principal office address)

P.O. Box 93636 Phoenix, AZ 85010-3636

(Current mailing address)

8. Construction Contractor

(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: John H. Shahbazi

Office Address: 6471 3rd Palm Point

St. Pete Beach

(City)

, Florida 33706

(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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: John H. Shahbas

Address: 6471 3rd Palm Point

St. Pete Beach, Florida 33706

Vice President: GARY BECKNEILL

Address: P.O. Box 128

PINELLAS PARK FL. 33780

Secretary: Valeria E. Anderson

Address: P.O. Box 93636 Phoenix, AZ 85010-3636

Treasurer: Valeria E. Anderson

Address: P.O. Box 93636 Phoenix, AZ 85010-3636

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. John Harrison Shahbas / President

(Typed or printed name and capacity of person signing application)

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

TRI-COM SYSTEMS CORPORATION

FILE NUMBER: C2793097
FORMATION DATE: 10/13/2006
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

FILED
08 DEC -5 PM 2:05
SECRETARY OF STATE
SACRAMENTO, CALIFORNIA

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to exercise
all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of November 14, 2008.

Debra Bowen

DEBRA BOWEN
Secretary of State