F09000001993

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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W09-22053

MAY 1 8 2009

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Grape Crusader, Inc.				
	ration - must include suffix)			
Dear Sir or Madam:				
	for Authorization to Transact Business in Florida," to register the above referenced foreign corporation to			
Please return all correspondence concerning this ma	atter to the following:			
Irene Fiedler				
(Nam	e of Person)			
Grape Crusader, Inc.				
(Firm	(Company)			
28100 Bouquet Canyon Road, Suite	203			
	Address)			
Saugus, CA 91350				
(City/St	ate and Zip code)			
For further information concerning this matter, plea	ase call:			
Irene Fiedler at (66	1) 296-7404			
(Name of Person) (A	rea 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 & \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy			



May 11, 2009

IRENE FIEDLER 28100 BOUQUET CANYON ROAD SUITE 203 SAUGUS, CA 91350

SUBJECT: GRAPE CRUSADER, INC.

Ref. Number: W09000022053

We have received your document for GRAPE CRUSADER, 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.

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4) or 608.502(4), F.S., this office is required to collects a civil penalty of \$1,000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

The document must contain both the street address of the principal office and the mailing address of the entity.

A brief description of the entity's nature of business must be included in the document.

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) 245-6931.

Becky McKnight Regulatory Specialist II New Filing Section

Division of Corporations - P.O. BOX 6397 - Tallahassoo, Florida 3931

Letter Number: 509A00015904

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.	. Grape Crusader, Inc.								
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")								
i	(If name unavail	shle in Florida, enter alternata comporata nom	adapted for	the marmage of transporting ha			->		
	California	vailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) a							
(5	State or country	under the law of which it is incorporated)		(FEI number, if applicab	ole)				
4. <u>-</u>	2/9/2007	5	. 0	ŕ					
	(Date	of incorporation)	(Duration:	Year corp. will cease to exis	st or "perp	etual"	')		
6.		UPON QUALIFIC	A-7						
·. <u>-</u>		(Date first transacted business	n Florida, if						
		(SEE SECTIONS 607.1501 & 607.1	502, F.S., to	determine penalty liability)					
7	28100 B	CURUET CHNYON ROND	37. 37.	3 Sinugus CH.	9125	7			
		Coquet Cunyon Rond (Principal office ad	ress)						
	28100 (Brigger Common Rous	<75 2c	22 SW-2925 (V	4 917	×50)		
_		Bougust Compon Rows (Current mailing ad	ress)	23, 340 (33, 23	<u> </u>	<u>,,, ,,</u>			
8	Distrib	FIGURE FORME							
	(Purpose(s) of corporation authorized in home state or c	ountry to be	carried out in state of Florida		a			
9. N	Name and stree	et address of Florida registered agent: (P.). Box. NO	T accentable)		9	. I top		
			7. BOX 110	<u>r_</u> ucooptuoic)		HAY	. T (
	Name:	Pandelis Damigos			.55	J	1 1		
Offi	ice Address:	ress: 312 S. Old Dixie Highway, Ste. 202				PH 3:	- Transfer		
		Jupiter	, Florida 33458				1,		
		(City)	, . 101	(Zip code)		<u>ა</u>			

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: Address: **B. OFFICERS** President: Mitch Fiedler Address: 28100 Bouquet Canyon Road, Suite 203 Saugus, CA 91350 Vice President: Secretary: Irene Fiedler Address: 28100 Bouquet Canyon Road, Suite 203, Saugus, CA 91350 Treasurer: Mitch Fiedler Address: 28100 Bouquet Canyon Road, Suite 203, Saugus, CA 91350 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) 14. MITCH FIEDRIE - PRESIDENT Trens FIEDRIE - SECTETARY
(Typed or printed name and capacity of person signing application)

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

GRAPE CRUSADER, INC.

FILE NUMBER:

C2980650

FORMATION DATE:

02/09/2007

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

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 April 30, 2009.

DEBRA BOWEN
Secretary of State