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SECKE JARY OF STATE
AN LAHASSEE, FLORIDA

EP 9/11/09

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: EAST END GROUP 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:
STEVEN KACZMAREK
Name of Person
EAST END GROUP INC.
Firm/Company
4 HOMEWOOD DRIVE
Address
HAMPTON BAYS, N.Y. 11946
City/State and Zip code
SKACZ@OPTONLINE.NET E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
STTTEVEN KACZMAREK at (631) 594 1069
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Cloft 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 \$\ \tag{\$78.75 Filing Fee & \tag{\$87.50 Filing Fee, } \\ \text{Certificate of Status} \tag{\$Certified Copy} \tag{\$Certified Copy} \tag{\$Certified Copy} \tag{\$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.

JAN. 26 19	under the law of which it is incorporated)	
		11 3475937 (FEI number, if applicable)
	99 5.	PERPETUAL
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
·		in Florida, if prior to registration) 502, F.S., to determine penalty liability)
4 HOMEWO	OD DRIVE HAMPTON BAYS, N.Y.	11946
	(Principal office add	
FINANCIAL	(Current mailing add	SEED
(Purpose(s) of corporation authorized in home state or co	ountry to be carried out in state of Florida)
Name and street	et address of Florida registered agent: (P.C	J. Box NOT acceptable)
Name and street Name:	PAUL HOFFMAN	O. Box NOT acceptable)
		 O. Box NOT acceptable) →
Name:	PAUL HOFFMAN	5. Box NOT acceptable) , Florida 33432

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/of directors.	
A. DIRECTORS	
Chairman: STEVEN KACZMAREK	
Address: 4 HOMEWOOD DRIVE	
HAMPTON BAYS, N.Y. 11946	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	 0
President: STEVEN KACZMAREK	ALEU SE
Address: 4 HOMEWOOD DRIVE	HE P
HAMPTON BAYS, N.Y. 11946	RY CREE
Vice President: PAUL HOFFMAN	FS F.
Address: 15 ROYAL WAY #204	30 ATE ARIDI
BOCA RATON, FL. 33432	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing	
13. (Signature of Director or Officer listed in number 12 of	of the application)
14. STEVEN KACZMAREK PRESIDENT	or the approximent
(Typed or printed name and capacity of person sign	ing application)

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of EAST END GROUP, INC. was filed on 01/26/1999, 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.

WITNESS my hand and the official seal of the Department of State at the City of Albany; this 25th day of August two thousand and nine.



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