

10000002113

(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:

W1-15962

Office Use Only



400173134184

03/29/10--01031--011 \*\*87.50

05/05/10--01020--008 \*\*1100.00

2010 APR 30 PM 1:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

100  
4/30



**FLORIDA DEPARTMENT OF STATE**  
**Division of Corporations**

March 31, 2010

SAMY SALAMA  
JALAZZI BRANDS CORP.  
13925 CITY CENTER DRIVE, SUITE 200  
CHINO HILLS, CA 91709

**SUBJECT: SUNDANCE SPAS, INC.**  
Ref. Number: W10000015962

We have received your document for SUNDANCE SPAS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$1,100.00.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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 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) 245-6934.

Loria Poole  
Regulatory Specialist II

Letter Number: 510A00007925

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** SUNDANCE SPAS, 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:

Samy Salama

(Name of Person)

Trenuzzi BRANDS Corp.

(Firm/Company)

13925 City Center Drive, Suite 200

(Address)

Chino Hills, CA 91709

(City/State and Zip code)

For further information concerning this matter, please call:

Samy Salama  
(Name of Person)

at ( 909 ) 247-2507

(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. SUNDANCE Spas, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")

2010 APR 30  
1:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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(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. 35-0803841

(FEI number, if applicable)

4. 4/26/1998

(Date of incorporation)

5. PERPETUAL

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

6. 10/1/06

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

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

7. 13925 City Center Drive, Ste. 200 Chino Hills, CA 91709

(Principal office address)

13925 City Center Drive, Ste. 200 Chino Hills, CA 91709

(Current mailing address)

8. Sales

(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

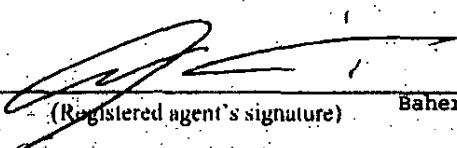
Florida 33324

(City)

(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)

Baher Tanius, Assistant Secretary

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: Tom Koos

Address: 13925 City Center Drive, Ste. 200 Chino Hills, CA 91709

Vice Chairman: Anthony Lovallo

Address: 13925 City Center Drive, Ste 200 Chino Hills, CA 91709

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

2010 APR 30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
TIP  
PM 1:50

## B. OFFICERS

President: Bob Rowan

Address: 13925 City Center Drive, Ste 200 Chino Hills, CA 91709

Vice President: David Broadbent

Address: 13925 City Center Drive, Ste 200 Chino Hills, CA 91709

Secretary: Anthony Lovallo

Address: 13925 City Center Drive, Ste 200 Chino Hills, CA 91709

Treasurer: David Broadbent

Address: 13925 City Center Drive, Ste 200 Chino Hills, CA 91709

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. David Broadbent, VP, Chief Financial Officer + Secretary

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

# State of California

## Secretary of State

### CERTIFICATE OF STATUS

ENTITY NAME:

SUNDANCE SPAS, INC.

FILE NUMBER: C2106956  
FORMATION DATE: 04/28/1998  
TYPE: DOMESTIC CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

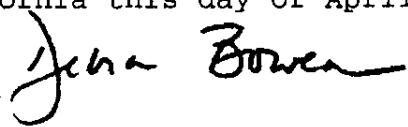
I, DEBRA BOWEN, Secretary of State of the State of California,  
hereby certify:

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 02, 2010.



DEBRA BOWEN  
Secretary of State