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2010 MAY 21 P 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

MAY 24 2010
D. A. WHITE

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: 24 Hours Express Locksmith 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," or "Certificate of Good Standing" 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:

Vinson Noel
Name of Person

24 Hours Express Locksmith
Firm/Company

241 East shore Rd
Address

Great Neck NY 11023
City/State and Zip code

Vinson Noel @ Tmo . BlackBerry . Net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vinson Noel at (646) 318-9591
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

RECEIVED
10 MAY 21 AM 11:02

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

May 5, 2010

VINSON NOEL
24 HOURS EXPRESS LOCKSMITH
241 EAST SHORE RD
GREAT NECK, NY 11023

SUBJECT: 24 HOURS EXPRESS LOCKSMITH INC.
Ref. Number: W1000021829

We have received your document for 24 HOURS EXPRESS LOCKSMITH 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):

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

The date on line 4 of the application must be the same as the date of incorporation listed on the Certificate of Existence.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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 collect 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.)

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White
Regulatory Specialist II

Letter Number: 310A00011218

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

Locksmith 24 Hours Express
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NY 3 020779137
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. May 18th 2006 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 241 East Shore Rd Great Neck NY 11023
(Principal office address)

241 East Shore Rd Great Neck NY 11023
(Current mailing address)

8. Locksmith
(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: Yaniv Ninyo

Office Address: 659 Oak Hollow Way

Altamonte Springs, Florida 32714
(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.

Yaniv Ninyo
(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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TALLAHASSEE, FLORIDA

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

FILED

A. DIRECTORS

Chairman: _____

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Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: Yaniv Ninyo

Address: 659 Oak Hollow Way Altamonte Springs, FL 32714

Director: _____

Address: _____

B. OFFICERS

President: Meir Efargan

Address: 241 East Shore Rd Great Neck, NY 11023

Vice President: Vinson Noel

Address: 30 Essex Pl Valley Stream, NY 11580

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

State of New York
Department of State } **ss:**

I hereby certify, that the Certificate of Incorporation of 24 HOURS EXPRESS LOCKSMITH INC. was filed on 05/18/2006, 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.

The Biennial Statement is past due.

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 21st day of April two
thousand and ten.*



First Deputy Secretary of State

201004220300 100

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED