

F110000001468

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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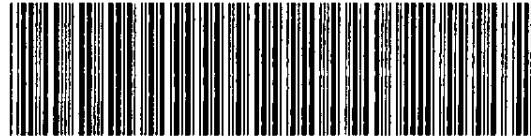
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
4/6

111 11339

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Zalda Technology 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," 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:

Johnny Qiu

Name of Person

Zalda Technology Corporation

Firm/Company

30998 Huntwood Ave., Suite 109

Address

Hayward, CA 94544

City/State and Zip code

johnnyqiu@zaldatechnology.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Johnny Qiu

Name of Person

at (510) 487-2289

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
11 APR -5 AM 11:27
DIVISION OF CORPORATIONS

March 22, 2011

JOHNNY QIU
ZALDA TECHNOLOGY CORPORATION
30998 HUNTWOOD AVE., SUITE 109
HAYWARD, CA 94544

SUBJECT: ZALDA TECHNOLOGY CORPORATION
Ref. Number: W11000016339

We have received your document for ZALDA TECHNOLOGY CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of incorporation listed in number four must match the date on the certificate of status from your state.

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 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.

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II

Letter Number: 111A00006994

**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. Zalda Technology 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, U.S.A.

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

3. 20-2100554

(FEI number, if applicable)

4. Jan. 3, 2005

(Date of incorporation)

5. Perpetual

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

6. _____

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

7. 30998 Huntwood Ave., Suite 109, Hayward, CA 94544

(Principal office address)

30998 Huntwood Ave., Suite 109, Hayward, CA 94544

(Current mailing address)

8. For profit, Sales of Industrial Equipment

(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: InCorp Services, Inc.

Office Address: 17888 67th Court North

Loxahatchee

(City)

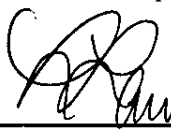
, Florida 33470

(Zip code)

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TALLAHASSEE FLORIDA

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.

 on behalf of InCorp Services, Inc.

(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Johnny Qiu

Address: 1917 Abreu Way
Union City, CA 94587

Vice Chairman: Susan Lo

Address: 32332 Whitehall Lane
Union City, CA 94587

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Johnny Qiu

Address: 1917 Abreu Way
Union City, CA 94587

Vice President: Simon Qiu

Address: 32332 Whitehall Lane
Union City, CA 94587

Secretary: Stephanie Ko

Address: 2432 Heritage Way, Union City CA 94587

Treasurer: Stephanie Ko

Address: 2432 Heritage Way, Union City, CA 94587

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Johnny Qiu, Chairman

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

State of California

Secretary of State

CERTIFICATE OF STATUS

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**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

ENTITY NAME:

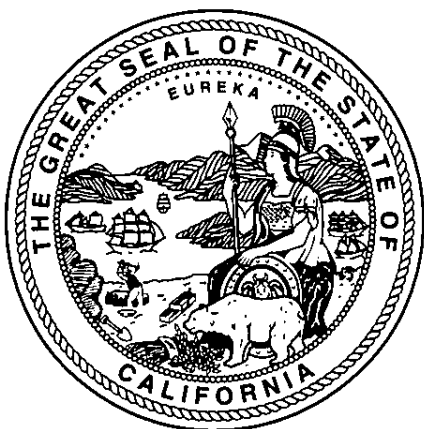
ZALDA TECHNOLOGY CORPORATION

FILE NUMBER: C2629908
FORMATION DATE: 01/03/2005
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 March 11, 2011.

Debra Bowen

DEBRA BOWEN
Secretary of State

FGB