

F11000002254

(Requestor's Name)

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(Address)

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☐ PICK-UP

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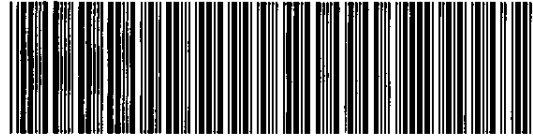
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE FLORIDA

MR 5/31

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: FRA SERVICES 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:

GARY S. GLASSER, ESQ.

Name of Person

GARY S. GLASSER, P.A.

Firm/Company

28 W. FLAGLER STREET, SUITE 608

Address

MIAMI, FLORIDA 33130

City/State and Zip code

GSG50@MSN.COM

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

For further information concerning this matter, please call:

GARY S. GLASSER, ESQ. at (305) 377-4187

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

**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. FRA SERVICES, INC.

(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. PUERTO RICO

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

3. 66-0706985

(FEI number, if applicable)

4. 1/15/08

(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. ARBOLES DE MONTEHIEDRA, BLVD ARBOLES, 600 BOX 447, SAN JUAN, PR 00926-7133

(Principal office address)

C/O GARY S. GLASSER, P.A., 28 W. FLAGLER STREET, SUITE 608, MIAMI, FLORIDA 33130

(Current mailing address)

8. ENGAGE IN ALL LAWFUL BUSINESS

(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: GARY S. GLASSER, ESQ.

Office Address: 28 W. FLAGLER STREET, SUITE 608

MIAMI

(City)

, Florida 33130

(Zip code)

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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:

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A. DIRECTORS

Chairman: _____

Address: _____

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TALLAHASSEE FLORIDA

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: FERDINAND RUANO

Address: ARBOLES DE MONTEHIEDRA, BLVD ARBOLES 600 BOX 447, SAN JUAN, PR 00926-7133

Vice President: _____

Address: _____

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

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. FERDINAND RUANO

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



Gobierno de Puerto Rico
DEPARTAMENTO DE ESTADO
San Juan, Puerto Rico

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TALLAHASSEE FLORIDA

CERTIFICADO DE CUMPLIMIENTO ("GOOD STANDING")

Yo, **KENNETH McCLINTOCK HERNÁNDEZ**, Secretario de Estado del Gobierno de Puerto Rico,

CERTIFICO: Que, a tenor con las disposiciones del Artículo 15.01 de la Ley General de Corporaciones de 2009, "**FRA SERVICES, INC.**", registro **178069** una corporación **con fines de lucro** organizada bajo las leyes de Puerto Rico ha cumplido con la radicación de Informes Anuales.

EN TESTIMONIO DE LO CUAL, firmo la presente y hago estampar en ella el Gran Sello del Estado Libre Asociado de Puerto Rico, en la ciudad de San Juan, hoy 12 de mayo de 2011.


KENNETH McCLINTOCK HERNÁNDEZ
Secretario de Estado

[/Coat of Arms/]
DEPARTMENT OF STATE
PUERTO RICO

Government of Puerto Rico
DEPARTMENT OF STATE
San Juan, Puerto Rico

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TALLAHASSEE, FLORIDA

CERTIFICATE OF GOOD STANDING

I, **KENNETH McCLINTOCK HERNÁNDEZ**, **Secretary** of State of the Government of Puerto Rico,

DO HEREBY CERTIFY: That pursuant to provisions set forth in Article 15.01 of the General Law of Corporations of 2009, "**FRA SERVICES, INC.**" registry number **178069**, a **for profit** corporation incorporated under the laws of Puerto Rico has complied therewith filing Annual Reports.

IN WITNESS THEREOF, I hereby affix my seal and signature, and hereby affix hereto the Great Seal of the Commonwealth of Puerto Rico, in the city of San Juan, on this twelfth (12) day of May, two thousand eleven (2011).

[/Signed: Kenneth D. McClintock/]

KENNETH McCLINTOCK HERNÁNDEZ
Secretary of State

[/Illegible official round inking seal/]

**CERTIFIED TRANSLATION
PREPARED BY
SEVEN LANGUAGES, INC.**

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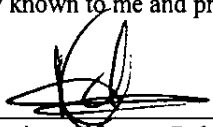
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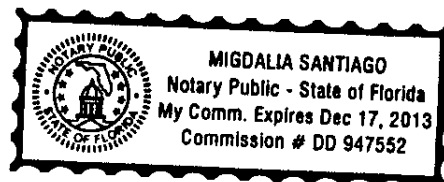
STATE OF FLORIDA }
COUNTY OF MIAMI-DADE }

BEFORE ME, on this day, personally appeared JOSEPH RICHARD PEREZ on behalf of SEVEN LANGUAGES TRANSLATING SERVICES, INC., who being duly sworn, deposes and says that he is fully versed in both the SPANISH and ENGLISH languages, that he is a Federal Court certified interpreter in English and Spanish and that he is a qualified and experienced translator from each of said languages to the other; and that to the best of his knowledge and belief, the translation attached hereto consisting of 1 pages, is a true and accurate rendition of the original aforesaid and is the last of the attached.


JOSEPH RICHARD PEREZ

The foregoing instrument was acknowledged by me on this 20 day of May, 2011. Joseph Richard Perez personally appeared before me at the time of notarization. He is personally known to me and produced a driver's license as identification and he did take an oath.


Migdi Santiago, Notary Public
State of Florida at Large



The utmost care has been taken to ensure the accuracy of all translations. Seven Languages Translating Services and its employees shall not be liable for any damages due to negligence or error in typing or translation.

OFFICES IN MIAMI • FT. LAUDERDALE • ORLANDO • TOKYO
19 W. FLAGLER ST. • SUITE 806 • MIAMI, FLORIDA 33130
DADE (305) 374-6761 • 24 HR. FAX (305) 374-0339 • 1-800-374-6761

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