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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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07/17/12

## COVER LETTER

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

**SUBJECT:** CYBERTECH SOLUTIONS 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," 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:

JEFFREY BAILEY

Name of Person

THE BAILEY LAW GROUP PLLC

Firm/Company

PO BOX 140848

Address

CORAL GABLES, FL 33114-0848

City/State and Zip code

JBAILEY@JBAILEYLAW.COM

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

For further information concerning this matter, please call:

Jeff Bailey at ( 305 ) 987-4920

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. CYBERTECH SOLUTIONS GROUP, INC.

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

CYBERTECH SOLUTIONS, INC.

(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. \_\_\_\_\_

(FEI number, if applicable)

4. 01/02/2007

(Date of incorporation)

5. PERPETUAL

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

6. N/A

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

7. ONE ALHAMBRA PLAZA, SUITE 600, CORAL GABLES, FL 33134

(Principal office address)

P.O. BOX 140848, CORAL GABLES, FL 33114

(Current mailing address)

8. 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: JEFFREY BAILEY

Office Address: ONE ALHAMBRA PLAZA, STE 600

CORAL GABLES

(City)

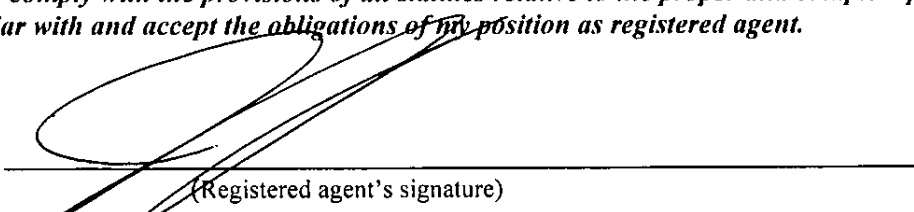
, Florida 33134

(Zip code)

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ST. BERNARDINE  
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.*

  
(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:

**A. DIRECTORS**

Chairman: MARTIN JIMENEZ

Address: ONE ALHAMBRA PLAZA, SUITE 600, CORAL GABLES, FL 33134

Vice Chairman: \_\_\_\_\_

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

Director: JEFFREY BAILEY

Address: ONE ALHAMBRA PLAZA, SUITE 600, CORAL GABLES, FL 33134

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

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

**B. OFFICERS**

President: \_\_\_\_\_

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

Vice President: \_\_\_\_\_

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

Secretary: JEFFREY BAILEY

Address: ONE ALHAMBRA PLAZA, SUITE 600, CORAL GABLES, FL 33134

Treasurer: MARTIN JIMENEZ

Address: ONE ALHAMBRA PLAZA, SUITE 600, CORAL GABLES, FL 33134

**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. \_\_\_\_\_

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

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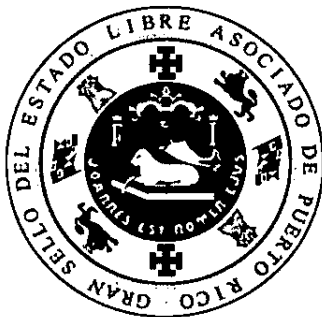


Government of Puerto Rico  
DEPARTMENT OF STATE  
San Juan, Puerto Rico

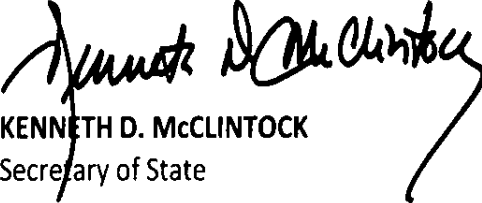
## CERTIFICATE OF GOOD STANDING

I, KENNETH D. McCLINTOCK, Secretary of State of the Government of Puerto Rico,

CERTIFY: That, CYBERTECH SOLUTIONS GROUP, INC., register number 168575, a for profit domestic corporation, organized under the laws of Puerto Rico, has complied with the filing of its Annual Reports.



IN WITNESS WHEREOF, I hereby sign  
this certificate, in the City of San Juan,  
today, June 06, 2012.

  
KENNETH D. McCLINTOCK  
Secretary of State

To validate this certificate go to: <http://www.estado.gobierno.pr>

This certificate can be validated up to 2 times before its expiration date of 04-Sep-2012.

Certificate Validation Number: 23120-70584601

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OFFICE OF THE ATTORNEY GENERAL  
FALLAH, SEBASTIAN  
FALLAH, SEBASTIAN