

F130000001209

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRB  
3/19/13

## COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: CARIBE HOTEL SERVICES LTD

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:

LUIS FERNANDEZ, Esq.

Name of Person

LUIS FERNANDEZ, P.A.

Firm/Company

2250 S.W. 3rd AVENUE. Ste 303.

Address

MIAMI, FL 33129

City/State and Zip code

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

For further information concerning this matter, please call:

George TABARES

Name of Person

at ( 786 ) 365-1050

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

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2013 MAR 18 AM 8:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

November 19, 2012

LUIS FERNANDEZ, ESQ.  
LUIS FERNANDEZ, P.A.  
2250 S.W. 3RD AVENUE, STE 303  
MIAMI, FL 33129

SUBJECT: CARIBE HOTEL SERVICES LTD  
Ref. Number: W12000058229

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

The use of LIMITED or LTD. is not sufficient as a corporate designation. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

The registered agent must have a Florida street address. A post office box is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ruby Dunlap  
Regulatory Specialist II

Letter Number: 812A00027818

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. CARIBE HOTEL SERVICES LTD 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. NEW YORK

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

3. \_\_\_\_\_

(FEI number, if applicable)

4. 09/20/2004

(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. 107 LASSEN COURT #5 PRINCETON, NEW JERSEY 08540

(Principal office address)

SAME AS # 7

(Current mailing address)

8. DOMESTIC BUSINESS CORPORATION

(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: TOMMASO GUISTI

Office Address: 7171 CORAL WAY STE 402

MIAMI, FLORIDA

(City)

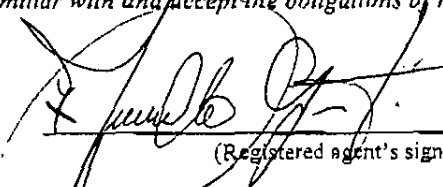
, Florida 33155

(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.



(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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TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: TOMMASSO GUISTI  
Address: 107 LASSEN COURT # 5  
PRINCETON, NEW JERSEY 08540

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

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

Director: TOMMASSO GUISTI

Address: 107 LASSEN COURT # 5  
PRINCETON, NEW JERSEY 08540

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

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

B. OFFICERS

President: TOMMASSO GUISTI

Address: 107 LASSEN COURT # 5  
PRINCETON, NEW JERSEY 08540

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]

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. TOMMASSO GUISTI

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

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

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13 MAR 18 PM 2:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I hereby certify, that the Certificate of Incorporation of CARIBE HOTEL SERVICES LTD. was filed on 09/20/2004, 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 06th day of November two  
thousand and twelve.*

*First Deputy Secretary of State*