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PICK-UP	WAIT	MAIL.				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificate	es of Status				
Special Instructions to Filing Officer:						

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SECRETARY OF STATI ALLAHASSTE FLORID

18981-ACW

### **COVER LETTER**

New Filing Section Division of Corporations

TO:

SUBJECT: The Palestine Right to Return Coalition  Name of Corporation - must include suffix	_
Dear Sir or Madam:	
The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted register the above referenced not for profit corporation to conduct its affairs in Florida.	
Please return all correspondence concerning this matter to the following:	
Anas B. Amireh  Name of Person	
Firm/Company	
1943 N. University Dr. Address	
Coval Springs, FL, 33071 City/State and Zip Code	
Powerhouse_services @ yahoo. Com  E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Anas Amireh at 904 806-9141  Name of Person Area Code & Daytime Telephone Number	 r
MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  STREET/COURIER ADDR New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount:	
□ \$70.00 Filing Fee □\$78.75 Filing Fee & □\$78.75 Filing Fee & □\$78.75 Filing Fee & Certificate of Status Certified Copy Certified	e of Status $\delta$



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 25, 2014

ANAS B. AMIREH 1943 N UNIVERSITY DR. CORAL SPRINGS, FL 33071

SUBJECT: THE PALESTINE RIGHT TO RETURN COALITION, INC.

Ref. Number: W14000018981

We have received your document for THE PALESTINE RIGHT TO RETURN COALITION, 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):

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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Jessica A Fason Regulatory Specialist II

Letter Number: 814A00006419

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www.sunbiz.org

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

**FEBRUARY 10, 2014** 

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

### THE PALESTINE RIGHT TO RETURN COALITION

is duly incorporated as a Pennsylvania Corporation under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

### APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

	Palestine Right To Re				
(Name of corpor	ation: must include the word "IN ge as will clearly indicate that it i esent. "Company" or "Co." may	s a corporation	instead of a nat	ural person or partner	rship if not so contained
2	Pennsulvania	3	25.	-1863915	
	Pennsy Vania stry under the Jaw of which it is in				
4	7/24/2000 Pate of Incorporation)	5		Pepetual	
(D	ate of Incorporation)		(Duration: Ye	ar corp. Will cease to	exist or "perpetual")
6. (Date first condu	NA acted affairs in Florida if prior to re	gistration. See se	ections 617.150	& 617.1502, F.S. to	determine penalty liability.)
	1943 N. University				
	1943 N. Universit	y Dr. Can	el springs,	tt, 55011	`
		(Current ma	iling address)		
8. (Purpose(s) of c	Education 4   and 6 orporation authorized in home sta	charitable ate or country to	be carried out	in the state of Florida	tri fitti 🕶
9. Name and stre	eet address of Florida registere	ed agent: (P.O.	Box NOT ac	ceptable)	APR-9 AP
Name: _	ANAS AMIREH		_		Sec > T
Office Address:	1943 N. University	δι.	_		AM 8: 29 SEE FLORIDA
_	1943 N. University  Coral Springs		, Florida	33071	
	(City)			(Zip Coo	Je)
Having been nai designated in thi further agree to	agent's acceptance: med as registered agent and t is application, I hereby accep comply with the provisions o familiar with and accept the	t the appointn f all statutes r	ent as registe elative to the i	red agent and agra proper and comple	ee to act in this capacity. Te performance of my
		(Registered as	ent's signature)		<del></del>

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 addresses of officers and/or directors	
A. DIRECTORS	
Chairman: Anas Amireh	
Address: 2605 NW 124 th Are	
Coral Springs, Fz. 33065	
Vice Chairman: Susan Mahmoud	,
Address: 18040 North Jaxon	
Address: 18040 North Jaxon Southwest Ranches, FL, 33331	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	SEC:
President:	APR -
Address:	SEC. 1
	F 9 8
Vice President:	≥≥ ∾
Address:	
Secretary:	W-0. (b.)
Address:	
reasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing addi	itional officers and/or directors
(Signature of Chairman, Vice Chairman, or any officer listed in numb	per 12 of the application)
4. Anas B. Amirel - Chair man.  (Typed or printed name and capacity of person signing a	