

**F1500000 / 506**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

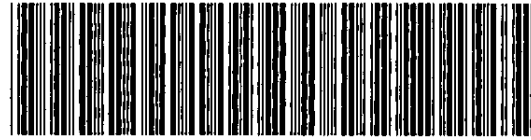
Special Instructions to Filing Officer:

Office Use Only

*W1400072052*

APR 09 2015

T. SCOTT



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15 APR -6 AM 9:22

STATE OF ARIZONA  
DEPARTMENT OF REVENUE  
TAX SERVICES DIVISION



15 APR -6 AM 10:26

FLORIDA DEPARTMENT OF STATE  
Division of Corporations TALLAHASSEE, FLORIDA

February 23, 2015

SAL ALBANO  
NEW DIMENSIONS  
1275 WOODMONT CRES  
LASALLE, ONTARIO, N9J-3H9 CA

SUBJECT: 1099017 ONTARIO INC. OA NEW DIMENSIONS  
Ref. Number: W14000072052

We have received your document for 1099017 ONTARIO INC. OA NEW DIMENSIONS 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 name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return the corrected original and one copy of 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.

Tyrone Scott  
Regulatory Specialist II  
New Filings Section

Letter Number: 615A00003732

**COVER LETTER**

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

**SUBJECT:** 1099017 Ontario Inc. L:  
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:

Sal Albano  
Name of Person

New Dimensions  
Firm/Company

1275 Woodmont Cres.  
Address

LaSalle, Ontario, N9J 3H9 CANADA  
City/State and Zip code

sal@newdimensionsproductions.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sal Albano at (519) 734-8081  
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. 1099017 Ontario 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. Canada (State or country under the law of which it is incorporated) 3. (FEI number, if applicable)

4. October 17, 1994 (Date of incorporation) 5. perpetual (Duration: Year corp. will cease to exist or "perpetual")

6. February 2011 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1275 Woodmont Cres., LaSalle, ON, N9T 3H9 CANADA (Principal office address)

1275 Woodmont Cres., LaSalle, ON, N9T 3H9 CANADA (Current mailing address)

8. Rental of property (vacation home) (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: WILLI BLATTNER

Office Address: 1100 US HWY 27 SO 136615

CLERMONT, Florida 34713 (City) (Zip code)

15 APR -6 AM 9:22

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: Dante D. Gatti

Address: 3180 Fazio Dr.  
Windsor, ON, N9E 4E6

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

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

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

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

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

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

**B. OFFICERS**

President: Sal Albano

Address: 1275 Woodmont Cres.  
LaSalle, ON, N9J 3H9

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. Sal Albano - President

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

February 12, 2015

Line 6 of the Application by Foreign Corporation  
for authorization to transact business in Florida should  
read: June 2014.

February 2011 is the date we purchased the property.

1099017 Ontario Inc.

per:   
Sal Albano

I, Aida Mary VanWees,  
certify this is a true  
copy of the letter dated  
February 12, 2015 and it  
was signed before me  
by Salvatore Albano,  
Ont. Lic. # A5163-68606-90826.



Request ID: 017317092  
Demande n° :  
Transaction ID: 56744028  
Transaction n° :  
Category ID: CT  
Catégorie :

Province of Ontario  
Province de l'Ontario  
Ministry of Government Services  
Ministère des Services gouvernementaux

Date Report Produced: 2015/02/11  
Document produit le :  
Time Report Produced: 11:00:39  
Imprimé à :

## CERTIFICATE OF STATUS ATTESTATION DU STATUT JURIDIQUE

This is to certify that according to the records of the Ministry of Government Services

D'après les dossiers du Ministère des Services gouvernementaux, nous attestons que la société

**1099017 ONTARIO INC.**

Ontario Corporation Number

Numéro matricule de la société (Ontario)

**001099017**

is a corporation incorporated, amalgamated or continued under the laws of the Province of Ontario.

est une société constituée, prorogée ou née d'une fusion aux termes des lois de la Province de l'Ontario.

The corporation came into existence on

La société a été fondée le

**OCTOBER 17 OCTOBRE, 1994**

and has not been dissolved.

et n'est pas dissoute.

Dated

Fait le

**FEBRUARY 11 FÉVRIER, 2015**

*W. J. Hall*

Director  
Directeur

*I, Aida Mary Van Wees,  
hereby certify this to be  
a true copy of the  
Certificate of Status  
for 1099017 Ontario Inc.  
Dated February 11, 2015*

*Aida Mary Van Wees*

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