

**Florida Department of State**  
**Division of Corporations**  
**Electronic Filing Cover Sheet**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H15000161397 3)))



H150001613973ABCO

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

**To:**

Division of Corporations  
 Fax Number : (850) 617-6383

**From:**

Account Name : PAUL SALVER, P.A.  
 Account Number : I20020000087  
 Phone : (954) 389-1333  
 Fax Number : (954) 389-1397

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**ANNCHOR SERVICES, LTD.**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$78.75

**FILED**  
 15 AUG 14 AM 8:02  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**AUG 17 2015**

**J SHIVER**  
 Help

**Electronic Filing Menu    Corporate Filing Menu**

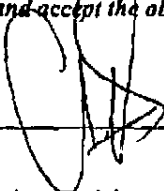
# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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. ANCHOR SERVICES LIMITED INC  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. BRITISH VIRGIN ISLANDS 3. 98-1240185  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 1/1/14 5. PERPETUAL  
(Date of incorporation) (Date of duration, if other than perpetual)
6. 1/1/15  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 2121 PONCE DE LEON BLVD., SUITE 545, CORAL GABLES, FL 33134  
(Principal office address)
- (Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  
Name: CARLOS DABOIN  
Office Address: 2121 PONCE DE LEON BLVD., SUITE 545  
CORAL GABLES, Florida 33134  
(City) (Zip code)

## 9. 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.

X   
(Registered agent's signature)

10. 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.

FILED  
15 AUG 14 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

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

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

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

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

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

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

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

Address: \_\_\_\_\_  
\_\_\_\_\_**B. OFFICERS**President: GLORIA ELENA SCRIBANY DE DABOINAddress: 2121 PONCE DE LEON BLVD., SUITE 545CORAL GABLES, FL 33134

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

Address: \_\_\_\_\_  
\_\_\_\_\_Secretary: CARLOS E. DABOINAddress: 2121 PONCE DE LEON BLVD., SUITE 545, CORAL GABLES, FL 33134

Treasurer: \_\_\_\_\_

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

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. X

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. CARLOS E. DABOIN

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

15 AUG 14 AM 8 00  
SECRETARY OF STATE  
ALLAHACSEE, FLORIDA

**TERRITORY OF THE BRITISH VIRGIN ISLANDS  
BVI BUSINESS COMPANIES ACT, 2004**

**CERTIFICATE OF GOOD STANDING  
(SECTION 235)**



8452FE9C20

The REGISTRAR OF CORPORATE AFFAIRS, of the British Virgin Islands HEREBY CERTIFIES that, pursuant to the BVI Business Companies Act, 2004 at the date of this certificate, the company,

**ANCHOR SERVICES LIMITED**

**BVI COMPANY NUMBER 1677629**

1. Is on the Register of Companies;
2. Has paid all fees and penalties due under the Act;
3. Has not filed articles of merger or consolidation that have not become effective;
4. Has not filed articles of arrangement that have not yet become effective;
5. Is not in voluntary liquidation;
6. Is not in liquidation under the Insolvency Act 2003;
7. Is not in receivership under the Insolvency Act, 2003;
8. Is not in administrative receivership; and
9. Proceedings to strike the name of the company off the Register of Companies have not been instituted.



FILED  
15 AUG 14 AM 8:06  
SECRETARY OF STATE  
HALL AND ASSOCIATES  
FLORENCE

*U. M. H. L. T.*

**REGISTRAR OF CORPORATE AFFAIRS**

11th day of August, 2015