

F18000002636

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

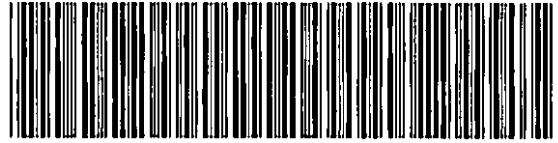
(Business Entity Name)

(Document Number)

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

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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations  
DEREX TECHNOLOGIES, INC

**SUBJECT:** \_\_\_\_\_  
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:  
RAJ S. MAAN

\_\_\_\_\_  
Name of Person  
DEREX TECHNOLOGIES INC

\_\_\_\_\_  
Firm/Company  
111 S. FRANK E. RODGERS BLVD., SUITE # 304/306

\_\_\_\_\_  
Address  
HARRISON, NJ 07029

\_\_\_\_\_  
City/State and Zip code  
RAJSINGH@DEREXTech.COM

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

For further information concerning this matter, please call:

RAJ MAAN                      973                      485-9442                      (973) 350 1200  
\_\_\_\_\_  
Name of Person                      Area Code                      Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration 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.*

DEREX TECHNOLOGIES, INC.

1. \_\_\_\_\_  
(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)  
NEW JERSEY, USA 223471174

2. \_\_\_\_\_ 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)  
NOV/ 1996

4. \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)  
APRIL 2018

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

7. 111 S. FRANK E. RODGERS BLVD., SUITE # 304/306, HARRISON, NJ 07029  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

RAJ MAAN

Name:

1767 Hermitage Blvd Apt #8207

Office Address:

Tallahassee

32308

(City)

Florida (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.*

*Raj Maan*

*President*

(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.

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

*President*  
Chairman:

RAJ S. MAAN

Address:

3 GALLOWAY CT West Orange NJ 07052

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

**B. OFFICERS**

RAJ S. MAAN

President:

3 GALLOWAY CT., WEST ORANGE, NJ 07052

Address:

VISHNU SINGH

Vice President:

111 S. FRANK E. RODGERS BLVD., SUITE # 304/306, HARRISON, NJ 07029

Address:

Secretary:

111 S. FRANK E. RODGERS BLVD., SUITE # 304/306, HARRISON, NJ 07029

Address:

Treasurer:

Address:

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

12.

*Raj S. Maan*  
Signature of Director or Officer

*President*

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.

RAJ S. MAAN

13.

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

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2018 JUN -5 PM 1:04  
CLERK OF COURT  
TALLAHASSEE, FLORIDA

STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY  
DIVISION OF REVENUE AND ENTERPRISE SERVICES  
SHORT FORM STANDING

DEREX TECHNOLOGIES, INC.

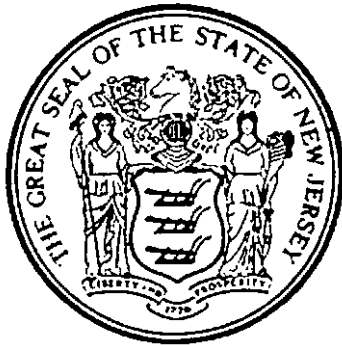
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*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on November 06, 1996.*

*As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey. Annual Reports are outstanding for the following year(s): 2017*

*I further certify that the registered agent and office are:*

RAJENDER MAAN  
3 GALLOWAY CT  
WEST ORANGE, NJ 07052



*IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 29th day of May, 2018.*

Elizabeth Maher Muoio  
State Treasurer

Certificate Number : 6088612416

Verify this certificate online at

[https://www1.state.nj.us/TYTR\\_StandingCert/USP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/USP/Verify_Cert.jsp)

*Handwritten signature and date: 5/29/2018*





## State of New Jersey

PHILIP D. MURPHY  
*Governor*

DEPARTMENT OF THE TREASURY  
DIVISION OF REVENUE & ENTERPRISE SERVICES  
P.O. BOX 026

SHEILA Y. OLIVER  
*Lt. Governor*

TRENTON, NJ 08625-034  
PHONE: 609-292-2146 FAX: 609-984-6679

ELIZABETH MAHER MUOIO  
*Acting State Treasurer*

### APPROVED

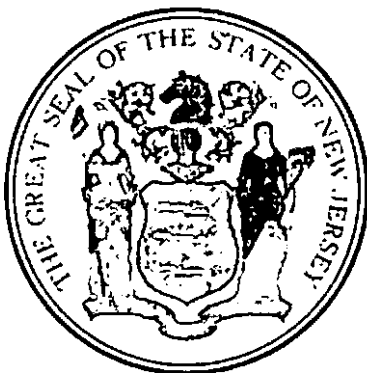
*under the*

Small Business Set-Aside Act and Minority and Women Certification Program

This certificate acknowledges DEREK TECHNOLOGIES INC as a Category 2 approved Small Business Enterprise that has met the criteria established by N.J.A.C. 17:13 and/or 17:14.

This registration will remain in effect for three years. Annually the business must submit, not more than 60 days prior to the anniversary of the registration notice, an annual verification statement in which it shall attest that there is no change in the ownership, revenue eligibility or control of that business.

If the business fails to submit the annual verification statement by the anniversary date, the SBE registration will lapse and the business SBE status will be revoked in the New Jersey Selective Assistance Vendor information (NJSAVI) database that lists registered small businesses. If the business seeks to be registered again, it will have to reapply and complete the New SBE online registration located at:  
[www.njportal.com/DOR/SBERegistry/](http://www.njportal.com/DOR/SBERegistry/).



Peter Lowicki  
Deputy Director

Issued: 3/17/2016  
Certification Number: A0042-00

Expiration: 3/17/2019