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(((H220000361683)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HUBCO

Account Number : 104662003400

Phone : (516)935-3940 Fax Number : (516)935-3088

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

Email Address: OFFICE@FIRSTLINEGC.COM

## FOREIGN PROFIT/NONPROFIT CORPORATION FIRSTLINE CONTRACTING, INC.

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H22000036168

# 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.

	FIRSTLINE CONTRA				
(Enter name of co "Inc.," "Co.," "Co	orporation: must include "INCORPORATED," "Corp." "Inc," "Co." or "Corp.")	OMPANY," "CORPORATION.			
(If name unavaila	ible in Florida, enter alternate corporate name adop	nted for the purpose of transacting	business in Florida)		
	NEW YORK 3				
(State or country	y under the law of which it is incorporated)	(FEI number, if applicable)			
S	EPTEMBER 12, 2007 5.				
(Date	(Date of incorporation) (Date of duration, if other tha		nan perpetual)		
	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502,		y)		
	44 S 1ST STREET, NEW HYD	E PARK, NY 11040			
	(Principal office s	treet address)			
			20 ~		
	(Current mailing ad	dress, if different)	2022 JAN 27		
			S. A		
Name and street	et address of Florida registered agent: (P.O. B	ox NOT acceptable)	27 21		
Name:	HUBCO REGISTERED AGENT SERVICES, INC	· <u>·</u>	LAHASSEE.F		
ffice Address:	155 OFFICE PLAZA DRIVE, 1ST FL	<del>-</del>			
	TALLAHASSEE	, Florida 32301	ω		
	(City)	(Zip code)			

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) BRUCE B. HUBBARD

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.

A. DIRECTORS

### H22000036168

□ Chairman	Name: MIKE MOUROUNAS	Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director	NEW HYDE PARK, NY 11040	□Director		
■President		□President		
□Vice President		□Vice President		
□ Secretary	☐Treasurer	☐ Secretary		□Treasurer
Other	Other	□()ther		Other
□Chairman	Name:	□ Chairman	Name;	
□Vice Chairman	Address:	□Vice Chairman	Address.	
□Director		Director		
□President		□President		
□Vice President		□Vice President		72
☐Secretary	□Treasurer	☐Secretary		□Treasurer J
□Other	Other	□Other		Other N T
☐Chairman ☐Vice Chairman ☐Director	Name:	□Chairman □Vice Chairman □Director	Name:	-
□President		□President		
□ Vice President		□ Vice President		
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other	□Other	□Other		☐ Other
individuals may b	Signature of Direc	etor or Officer	eport form.	
The officer or dip she is aware that i s.817,155, F.S.	clor signing this tocument (and who is fisted in m false imprimation submitted in a document to the D	epartment of State constitu	ates a third deg	ted herein are true and that he or ree felony as provided for in
13.	MIKE MOURC (Typed or printed name and capacity of	UNAS - PRESIDE		
	(a ypen or printed mane and capacity of	நாகை கையாக முழ்களைன	• 1	

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#### STATE OF NEW YORK

#### DEPARTMENT OF STATE

#### Certificate of Status

I, ROBERT J. RODRIGUEZ, Acting Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: FIRSTLINE CONTRACTING, INC.

**DOS ID Number:** 3566906

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING

Date of Initial Filing with DOS: 09/12/2007

Statement Status: CURRENT

Statement Due Date: 09/30/2021

I certify that the following is a list of documents on file in the Department of State for said entity:

**Document Type:** CERTIFICATE OF INCORPORATION

**Date of Filing:** 09/12/2007

Entity Name: FIRSTLINE CONTRACTING, INC.

Document Type: BIENNIAL STATEMENT

 Date of Filing:
 10/14/2011

 Effective Date:
 09/01/2011

Document Type: BIENNIAL STATEMENT

**Date of Filing:** 11/22/2013

Effective Date:

09/01/2013 H22000036168

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Document Type:

BIENNIAL STATEMENT

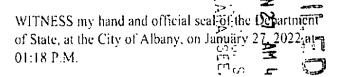
Date of Filing:

08/07/2020

**Effective Date:** 

09/01/2019

No information is available from this office regarding the financial condition, business activity or practices this entity.



ROBERT J. RODRIGUEZ, Acting Secretary of State

Brandon C. Higher

By Brendan C. Hughes

**Executive Deputy Secretary of State** 

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