

To:

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2024-04-15 19:03:47 GMT

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From: Yanet Avila

4/15/24, 3:00 PM

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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FOREIGN PROFIT/NONPROFIT CORPORATION

TELECOMUNICACIONES, MANTENIMIENTO Y SERVICIOS P&C C.A. CORP

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

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K. SALY

APR 16 2024

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. TELECOMUNICACIONES, MANTENIMIENTO Y SERVICIOS P&C C.A. CORP
(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. VENEZUELA
(State or country under the law of which it is incorporated)
3. N/A
(FEI number, if applicable)
4. 09/12/2018
(Date of incorporation)
5. _____
(Date of duration, if other than perpetual)
6. HAS NOT TRANSACTED BUSINESS
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, P.S., to determine penalty liability)
7. CALLE CORDOBA EDF MANAGUA 1 PISO PB LOCAL 1 SECT. C CENTRAL, CIUDAD OJEDA, ZULIA 4019 VZL
(Principal office street address)
C/O CHARM CONSULTING 1825 MAIN ST WESTON FL 33326
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: CHARM CONSULTING LLC
Office Address: 17012 NW 22 ST
PEMBROKE PINES, Florida 33028
(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.

(Registered agent 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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors (up to six (6) total):

A. DIRECTORS

☐ Chairman Name: DANIEL E. TUA SOTO
☐ Vice Chairman Address: C/O CHARM CONSULTING
☐ Director 1825 MAIN ST, WESTON FL 33326
☒ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

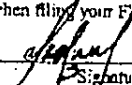
☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. 
 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. DANIEL E TUA SOTO /PRESIDENT

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

2024 APR 15 PM 11:22

FILED

CERTIFICATION

I hereby Certified that the attach Certificate (R.I.F.) is the equivalent to Certificate of Good Standing in Venezuela



Isabel Martinez
Register Agent
Notary Public



FILED
2024 APR 15 PM 11:22
CLERK OF COURT

			
N° COMPROBANTE: 201904C0330039545503			
REGISTRO ÚNICO DE INFORMACIÓN FISCAL (RIF)			
J412301390 TELECOMUNICACIONES, MANTENIMIENTO Y SERVICIOS P&C, C.A.		FECHA DE INSCRIPCIÓN:	10/01/2019
DOMICILIO FISCAL CALLE CORDOYA EDIF MANAGUA I PISO PB LOCAL 1 SECTOR CASCO CENTRAL CIUDAD GUAYAQUIL ZONA POSTAL 4019		FECHA DE ÚLTIMA ACTUALIZACIÓN:	29/02/2023
		FECHA DE VENCIMIENTO:	29/09/2026
GERENCIA REGIONAL DE TRIBUTOS INTERNOS REGION ZULIANA		3412301390-HZG FIRMA AUTORIZADA	
			
Condición: Contribuyente Ordinario del IVA: La condición de este contribuyente requiere la retención del 76% del impuesto causado, en lo que incurre en los supuestos establecidos para la retención del 100%.			
La validez de este Comprobante debe verificarse a través de la dirección www.seniat.gov.ve , Sistema en Línea mediante la opción 'Consulta Comprobante Digital RIF'. No requiere sello húmedo.			

VALIDADO

2024 APR 15 PM 1:22

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SENIABAR CODE:
FORM NUMBER: 201904C0000039545503

UNIQUE RECORD OF TAX INFORMATION (RIF)

J412301390 TELECOMUNICACIONES, MANTENIMIENTO Y SERVICIOS P&C. C.A.

REGISTRATION DATE: 01/10/2019
DATE FOR LAST UPDATE: 09/29/2023
EXPIRATION DATE: 09/29/2026FISCAL ADDRESS: CALLE CORDOVA EDIF MANAGUA 1 PISO PB LOCAL 1 SECTOR CASCO
CENTRAL CIUDAD OJEDA ZULIA ZONA POSTAL 4019DIVISION OF SPECIAL TAXPAYERS
(REGION ZULIA)J412301390-HZG
AUTHORIZED SIGNATURE

Condition: Ordinary VAT Taxpayer and VAT Withholding Agent: The condition of this taxpayer requires the retention of 75% of the tax caused, except that it incurs in the cases established for the retention of 100%.

The validity of this voucher must be verified through the www.senia.gob.ve address, Online Systems (Sistemas en Línea) through the option Check Digital RIF voucher (Consulta Comprobante Digital RIF). Does not require wet seal.FILED
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- Certificate of Translation

Before me on this day personally appeared Brunella Belleño, a member of the American Association of Translators (ATA), No. 257596, who being duly sworn deposes and says:

I am fluent in both English and Spanish.

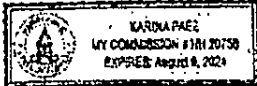
I certify that I have accurately translated the attached document(s) from Spanish into English.


Brunella Belleño

State of Florida)
County of Broward)

Sworn to and subscribed before me this 12 Day of April, 2024 by Brunella Belleño who is personally known


Notary Public



2800 Glades Cir Ste 121, Weston, FL 33377-1279 • Tel. 564.385-1777 • Fax 564.232-4361

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