

F9500000623

TRANSMITTAL LETTER

TO: QUALIFICATION/TAX LIEN SECTION
DIVISION OF CORPORATIONS

900001368799
-01/04/95--01056--001
*****70.00 *****70.00

SUBJECT: Dennis Joel Fine Arts, Ltd.
(Name of corporation - must include suffix)

Dear Sir or Madam:

W95-140

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", 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:

Dennis Schlon
(Name of Person)
c/o William J. Carson
(Firm/Company)
821 Franklin Avenue #211
(Address)
Garden City, NY 11530
(City, State and Zip Code)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB - 6 PM 3:29

Should you need to call someone concerning this matter, please call:

William J. Carson at (516) 746 - 0813
(Name of Person) Area Code & Daytime Telephone Number

COURIER ADDRESS:
Qualification/Tax Lien Sec.
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Qualification/Tax Lien Sec.
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE
STATE OF FLORIDA:

1. Dennis Joel Fine Arts, Ltd. Co.
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. New York 3. 11-2955122
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 2/89 5. Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. August 1, 1994
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.))
7. 1515 Old Northern Blvd.
Roslyn, NY 11576
(Current mailing address)
8. Sales
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent:
Name: Iris Herzog
Office Address: 7577 Sierra Dr. East
Boca Raton, Florida, 33433
(Zip Code)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
REGISTERED - 6 PM 3:29

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.

Iris Herzog
(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 addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Dennis Schlom

Address: 193-14 48th Ave.

Flushing, NY 11365

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. Dennis J. Schlom
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Dennis J. Schlom, President
(Typed or printed name and capacity of person signing application)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB - 6 PM 3:29

State of New York | ss:
Department of State

I hereby certify, that the certificate of incorporation of DENNIS JOEL FINE ARTS, LTD. was filed 02/06/1989, with perpetual duration, and that I have made a diligent examination of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, I find no such certificate, order or record, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

The Statement of Addresses and Directors is past due.

...

Witness my hand and the official seal
of the Department of State at the City
of Albany, this 05th day of December
one thousand nine hundred and
ninety-four.



Secretary of State

199412060463

SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB - 5 PM 3:30

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
 AMOUNT DUE ON OR BEFORE 8/7/96 \$275 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT CORPORATION
 1996



FLORIDA DEPARTMENT OF STATE
 Sandra B. Northam
 Secretary of State

FILED

96 NOV - 4 PM 2:34

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

REINSTATEMENT

DOCUMENT # F95000000623 (7)

DENNIS JOEL FINE ARTS, LTD. CO.



Handwritten initials: JR/8

| | | | |
|--|--|--|--|
| Principal Place of Business | | Mailing Address | |
| 1515 OLD NORTHERN BLVD. ROSLYN NY 11578 | | 1515 OLD NORTHERN BLVD. ROSLYN NY 11578 | |
| 2. Principal Place of Business | | 3a. Date of Last Report | |
| 21 165 MAIN ST | | 02/06/1995 | |
| 22 City & State | | 3b. Date of Last Report | |
| 23 PORT WASHINGTON, NY | | 24 | |
| 24 11050 | | 25 | |

| | | | | | | | | | | | |
|--------------------------------|--|------------------------|--|---------------|--|----------------------------------|--|--------------------------------|--|--|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 4. FEI Number | | 5. Certificate of Status Desired | | 6. Election Campaign Financing | | 7. This corporation has liability for intangible tax under s. 190.032, Florida Statutes | |
| 21 165 MAIN ST | | 20 165 MAIN ST | | 11-2955122 | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> \$8.75 Additional Fee Required <input type="checkbox"/> \$5.00 May Be Added to Fees <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| 22 City & State | | 27 City & State | | 28 | | 29 | | 30 | | | |
| 23 PORT WASHINGTON, NY | | 28 PORT WASHINGTON, NY | | 29 11050 | | 30 | | | | | |

| | | | | | | | |
|---|--|--|--|---|--|--|--|
| 9. Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | | | |
| HERZOG, IRIS 7577 SIERRA DR. EAST BOCA RATON FL 33433 | | | | 81 Name | | | |
| | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | |
| | | | | 83 | | | |
| | | | | 84 City | | | |
| | | | | 85 Zip Code | | | |
| | | | | FL | | | |

11. Pursuant to the provisions of Sections 607.0502 and 607.1108, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Iris Herzog* DATE: 10/31/96

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|-------------------|---|---------------------|
| TITLE | P | 1.1 TITLE | |
| NAME | SCHLOM, DENNIS | 1.2 NAME | |
| STREET ADDRESS | 183-14 48TH AVE. | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | FLUSHING NY 11365 | 1.4 CITY-ST-ZIP | 200002003742--8 |
| TITLE | | 2.1 TITLE | 11/13/96 01195 014 |
| NAME | | 2.2 NAME | ***383.75 ***385.15 |
| STREET ADDRESS | | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 2.4 CITY-ST-ZIP | |
| TITLE | | 3.1 TITLE | |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | | 4.1 TITLE | |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Dennis Schlom* DATE: 01/1/96

CR2E034 (3/96)