F9500003950

TRANSMITTAL LETTER

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TO: QUALIFICATION/TAX LIEN SECTION DIVISION OF CORPORATIONS

2000001535492 -07/12/95--0023--003 *****70.75 *****70.75

6)15 13179.

SUBJECT: 173576 CANADA Tue.
(Namo of corporation - must include suffix)

Doar Sir or Madam:

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:

(Name of Person)

(Firm/Company)

315 De Soro St.

(Address)

Howwood FL 33017

(dity, State and Zip Code)

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500001562575 -08/16/95--01097--002 ***2800.00 ****2800.00

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

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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 12, 1995

PETER STAVROPOULOS % 173576 CANADA, INC. 315 DESOTO ST. HOLLYWOOD, FL 33019

SUBJECT: 173576 CANADA, INC. Ref. Number: W95000013978

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We have received your document for 173576 CANADA, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A brief description of the entity's nature of business must be included in the document.

Section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, requires this office to collect a \$500 penalty fee for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$2800.00.

Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, which lists those activities that to not constitute transacting business or conducting affairs in this state. If after reviewing this section you determine erroneous information was inserted on the application, a sworn affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business or conducting its affairs in Florida prior to the year the application was submitted did not constitute transacting business or conducting affairs pursuant to section 607.1501 or 617.1501, Florida Statutes.

If you have any questions concerning the filing of your document, please call (904) 487-6097.

Michael Mays Document Specialist

Letter Number: 495A00033413

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:

1315 DE 30,0 JT. Howwood Fe 33019 SE 50 1981	(Name of corporation: must include the word "INCORPORATED", "COMPANY" CORPORAbbroylations of like import in language as will clearly indicate that it is a corporation instead or partnership if not so contained in the name at present.)	ATION* or words or ad of a natural person
6. June 17 1991 (Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.) 7. J.S. De Sorro St. Howwell the And Management of Motel (Current mailing address) 8. Ownership And Management of Motel (Purpose(s) of corporation authorized in home state or country to be carried out in the state deficient.) 9. Name and street address of Florida registered agent: Name: Makin H. Alman Office Address: 17064 W. Dixie Highway Ne Midmill Reach Florida, Wigoway	2. CANAIA (State or country under the law of which it is incorporated) 4. MAY 8. (990 5 PEARATIA)	ia)
(Current mailing address) 8. Ownership And Management of Mater (Purposes) of corporation authorized in home state or country to be carried out in the state deflorider 9. Name and street address of Florida registered agent: Name: Marin H. Alman Office Address: 17064 W. Dixie Hickory No. Mi Ani Beach , Florida , 2016-2023	6. JUNA L7, 1991 (Dato first transacted business in Florida. (See sections 007.1501, 007.1502, and 817.155, F.S.)	(*/):
(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: MAKIN H. ALMAN Office Address: 17064 W. J.KIE HIGHWAY No. M. Ami Boach , Florida , 33603333		SSEELT BE
Name: MARTIN H. ALMAN Office Address: 17064 W. DIXIE HIGHWAY No. MIAMI BEACH , Florida, 331603723	(rurposets) or corporation authorized in home state or country to be carried out in the si	pan de Llouide.
No. M. AMI BEACH , Florida , JUIGOUSZUS	Name: MARTIN H. ALMAN	

10. Registered agent's acceptance:

173576 CAME T.

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)

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: _ Addross: ___} Vico Chairman: Address: _ Diroctor: __ Addross: ___ Director: _ Address: ___ В. **OFFICERS** President: __/ Address: 315 13012 Vice President: ___ Address: __ Secretary: __ Address: Treasurer: _ VAME-Address: _

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

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

14. Typed or printed name and capacity of person signing application)

Industry Canada

Industrio Canada

Canada Businesa * Corporations Act

Loi canadionno sur les sucidiés par actions

CERTIFICATE OF COMPLIANCE S.S. 263(2)

173576 CANADA INC.

Name of corporation-Dénomination de la société

I HEREBY CERTIFY that the corporation named above is a body corporate incorporated or continued under the Canada Business Corporations Act and not discontinued under that Act and that it has not been dissolved and it has sent to the Director the required Annual Returns and Financial Statements.

Deputy Director - Directeur adjoint

CERTIFICAT DE CONFORMITÉ S.S. 263(2)

SECULIANASSEE FLORIDA
260401-9

Number - Numbro

JE CERTIFIE, par les présentes, que la société ci-dessus mentionnée est une personne morale constituée ou prorogée en vertu de la *Loi canadienne sur les sociétés par actions* et n'a pas changé de régime en vertu de cette Loi et qu'elle n'a pas été dissoute et la société a remis au directeur les rapports annuels et les états financiers dont l'envoi est requis.

April 11, 1995/le 11 avril 1995

Date