# F96000000332

Division of Corporations

SUBJECT: Culinary Ventures. Inc.
(Name of corporation - must include suffix)

#### Dear Sir or Madam:

Qualification/Tax Lien Section

TO:

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:

Mr. Jack Yuppa		**************************************	1070000
(Name of Pers	юп)	****70.00	01079006 ******70.00
Culinary Ventures, Inc.			
(Firm/Compa	ny)		
220 Murray Street			1.6
(Address)			SECTION 1
Newark, NJ 07114			
(City/State/Zi	p)		ें ज
			유 글 <sup>D</sup> 유 설
Should you need to call someone concerning this matt	ter, please call:		
Jack Yuppa	at (	624-3200	- untr
(Name of Person)		aytime Telephone Nu	ımber)

#### **COURIER ADDRESS:**

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

#### **MAILING ADDRESS:**

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

## 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.	nary Ventures, Incorporated			
(Name of corpor	ation: must include the word "INCORPOR ike import in language as will clearly indic ship if not so contained in the name at pre-	ATED", "Coate that it is sent.)	OMPANY","CORPORAT a corporation instead of a	TON" or words or natural
2 Now	Jorsey	3	22-3315887	
(State or country un	der the law of which it is incorporated)	·	(FEI number, if ag	plicable)
4. 08-02		5.	Perpetual	
•	Incorporation)	(Duratio	n: Year corp. will cease to	exist or "perpetual")
6. 01-01	=			
(Date first tra	nsacted business in Florida. (SEE SECTIONS	s 607.1501	,607.1502, AND 817.155, F	.S.)
7. 220 1	Murray Street			
Newar	rk, NJ 07114			
<del></del>	(Current mailin	ng address)		
8. Cafet	ceria			
(Purpose(s) of corp	oration authorized in home state or countr	ry to be carr	ied out in the state of	<del></del>
Florida)				တ္က ျူးမွာ
9. Name and streaceptable)	eet address of Florida registered	agent: (	P.O. Box or Mail Dro	
Name:	Mr. James Henley			三 [2] [2]
1441110.	c/o Florida Memorial Colle	ege		
Office Address: _	15800 N.W. 42nd Avenue			STATE 3:10
			77064	
	Miami	, Fl	orida, 33054 (Zip Code)	
10. Registered as	gent's acceptance:		(Zip Code)	
corporation at the registered agent a all statutes relative	ed as registered agent and to accept place designated in this application of agree to act in this capacity. It is the proper and complete perfoligations of my position as register (Registered agent)	on, I here further a ormance d	by accept the appoint gree to comply with th of my duties, and I am	ment as we provisions of

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: (Street address ONLY- P. O. Box NOT acceptable)

	24 partitions 25017, 10000000000000000000000000000000000	<del></del>	
ice Chair Address: _	man: Joseph Belasco 33 Summit Avenue, Cedar Grove, NJ 07009		
 . :irector	Jack Yuppa		
ddress: _	73 Clinton Road		
-	Fairfield, NJ 07004		
rector: _	Thomas DiNardo		
	8 Robin Place		
	Fairfield, NJ 07004		
	Jack Yuppa 73 Clinton Road		
- aa Draeid	Fairfield, NJ 07004  ent: James Henley & Th	nomas DiNardo	
		Robin Place	
uress	· · · · · · · · · · · · · · · · · · ·	irfield, NJ 07004	35
- refary:	David M. Licata		<del>J</del> AN
dress:	94 Burlington Court		12
<b>G</b> 1035	Hamburg, NJ 07419		₽
easurer:	Joseph Belasco		ယ္
	33 Summit Avenue , Cedar Grove, NJ 07009		<u> </u>
OTE: If:	necessary, you may attach an addendum to the applicat	ion listing additional	

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

### NEW JERSEY SECRETARY OF STATE

CULTNARY VENTURES, INC.

I, THE SECRETARY OF STATE OF THE STATE OF NEW JERSEY, DO HEREBY CERTIFY THAT THE RECORDS OF THIS OFFICE SHOW THAT THE CHARTER/AUTHORITY OF THE ABOVE-NAMED NJ BUSINESS WAS FILED IN THIS OFFICE ON AUG. 02,1994.

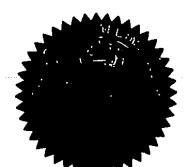
I FURTHER CERTIFY, THAT SO FAR AS THE RECORDS OF THIS OFFICE SHOW, SAID BUSINESS HAS NOT BEEN DISSOLVED, CANCELLED, OR WITHDRAWN, NOR HAS ITS CHARTER/AUTHORITY BEEN VOIDED/REVOKED FOR NON-PAYMENT OF STATE TAXES BY PROCLAMATION. IT NOW CONTINUES TO MAINTAIN ACTIVE STATUS WITHIN THE STATE OF NEW JERSEY. AT THE TIME OF THE ISSUANCE OF THIS CERTIFICATE, ANNUAL REPORTS ARE CURRENT.

I FURTHER CERTIFY THAT THE LOCATION OF THE REGISTERFO OFFICE IS

94 BURLINGTON COURT

HAMBURG

AND THE REGISTERED AGENT IS DAVID M LICATA.



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