# F96000001015

TO: Qualification/Tax Lien Section Division of Corporations

700001720377 -02/21/96--01051--002 \*\*\*\*131.25 \*\*\*\*131.25

SUBJECT: MAXON ENGINEERING SERVICES, INC.

(Name of corporation - must include suffix)

W96-3997

Dear 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:

BENJAMIN JIMENEZ	95 1710
(Name of Person)	SECRE ISIGN
ATTORNEY AT LAW	FIL FOF C B 28
(Firm/Company)	CORPC CORPC
600 N. THACKER AVENUE, SUITE D-38	STA STA
(Address)	94 LIGHS
KISSIMMEE, FLORIDA 34741-4835	unto
(City/State/Zip)	11010

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

BENJAMIN JIMENEZ, ESQ. at 407 870-8835
(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 Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



# FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

February 22, 1996

BENJAMIN JIMENEZ % ATTORNEY AT LAW 600 N, THACKER AVENUE, STE D-38 KISSIMMEE, FL 34741-4835

SUBJECT: MAXON ENGINEERING SERVICES INC.

Ref. Number: W96000003997

SECRETARY OF STATE OF CORPORATIONS

We have received your document for MAXON ENGINEERING SERVICES INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Michael Mays Document Specialist

Letter Number: 396A00007732

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607, ISO3, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	Maxon (Name of corp abbreviations of person or part	Engineerij orstion: must in of like import in nership if not so	ng Services. I clude the word "INCORP language as will clearly in contained in the name at p	DC. ORATED", "O dicate that it is present.)	COMPANY","COR	PORATION" or ad of a natural	words o	r
			•					
2, (	Puerto State or country	nder the law of	which it is incorporated)	3	Applied (FEI numb	er, if applicable		<del></del>
•					(**************************************	ort abbriogoto	,	
4.	March 3	1984	)	5	perpetual			
6.	opon	quartiti	ation				S. S. beabeins	SEC SEC
	(Date first	transacted busine	esa in Florida, (SEE SECTIO	ONS 607.1501,	607.1502, AND 817	/.155, F.S.)	<u> </u>	
7	1250 pc	ngo Do te	eon Avenue, Su:	1 005			28	
7.	1230 FC	Wice he he	on avenue, Su.	10e 905				<u> 20</u> 0
	San Jua	n , Puert	o Rico 0090	07			D: C	RATI
		<del>-</del>	(Current ma	iling address)			<del>-</del>	- <u>5</u> m
9, 1	acceptable)	treet address	of Florida registere	ed agent: ()	P.O. Box or Ma	il Drop Box ]	TON	
	140110.							
Offi	ice Address:	600 N. T	hacker Ave. Su	ite C-14	4			
			·					
	_	Kissimme	e	, Flo				
10.	_ Registered	Kissimme agent's accep	e ptance:	, Flo		<del></del>		

incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY-P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) Chairman: Juan D. Mingag Address: Condominio Playa Blanca Apt #1102 Ave. Isla Verde, Carolina P.R. Vice Chairman: Lydia De Jesus Address: Quintas Reales, Calle Rey Jorge V-N-5 Guaynabo, Puerto Rico 00966 Director: \_\_\_\_\_ Address: \_\_\_\_ Director: Address: \_\_\_\_\_ B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: Juan D. Mieses Address: Condominio Playa Blanca, Apartamento #1102 Avenida Isla Verde, Carolina, Puerto Rico 00979 Vice President: Lydia De Jesus Address: Quintas Reales, Calle Rey Jorge V-N-5 Guaynabo, Puerto Rico 00966 Secretary: \_\_\_\_Max A. Mieses Meiia Address: Calle 4 J-21 , Hermanas Davila Bayamon, Puerto Rico 00958 Treasurer: \_\_\_\_ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Mice Chairman, or any officer listed in number 12 of the application)

Juan D. Mieses President

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

# CERFICATE OF DESIGNATION OF REGISTERED AGENT

Pursuant to Florida Statutes, Sections 607.0501 or 617.0501 the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in desingatingthe registered agent and registered office in the State of Florida.

- 1. The name of the corporation is: MAXON ENGINEERING SERVICES, INC.
- The name and address of the Registered Agent are: 2.

IGNACIO GONZALEZ 600 North Thacker Ave. Suite C-14 Kissimmee, Florida 34741

# CERTIFICATE OF ACKNOWLEDGMENT OF REGISTERED AGENT

Having been named to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply o with the provisions of Florida law in keeping open said office at 600 N. Thacker Ave. Suite C-14, Kissimmee, Florida 34741k

STATE OF FLORIDA OSCEOLA COUNTY

Before me, a Notary Public authorized to take acknowledgement in the State and County set forth above, personally appeared Ana M. Carvajal, known to me and known to be the person who executed the foregoing Certificate of Acknowledgment of Registered Agent.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 16 day of

February, 1996.

C 2619.

MINIMUM JIMEN AMIN JIMEN

Benjami Jimenez Notary Public



## COMMONWEALTH OF PUERTO RICO DEPARTMENT OF STATE SAN JUAN, PUERTO RICO 00904

I, ANA MARIA NIGGEMANN, Director of the Corporate and Trademark Registries of the Department of State of the Commonwealth of Puerto Rico,

CERTIFY: That \*MAXON ENGENEERING SERVICES, INC.\*, file 56,456 is a corporation organized under the .awsoof Puerto Rico on March 3, 1984 at 11:44 a.m.

IN WITNESS WHEREOF, undersigned by virtue of authority vested by law, issue this certificate and affixes the Great Seal of the Commonwealth of Puerto Rico, in the City of San Juan, this 19th ο£ January nineteen hundred ninety six.

Ana Maria Niggemann

Director

Corporate and Trademark

Registries