

F 96000004223

TO: Qualification/Tax Lien Section
Division of Corporations

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
AUG 19 1996

SUBJECT: ETOILE PLACEMENT S.A.
(Name of corporation - must include suffix)

Dear Sir or Madam:

6096-16218

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:

AMY TEITELBAUM
(Name of Person)

500 ROYAL POINCIANA PLAZA
(Firm/Company)
350 ROYAL POINCIANA WAY
(Address)

PALM BEACH, FL. 33480
(City/State/Zip)

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DIVISION OF CORPORATIONS
96 AUG 19 AM 11:27

mtm

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

AMY TEITELBAUM at (407) 659-4550
(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

August 5, 1996

AMY TEITELBAUM
5C ROYAL POINCIANA PLAZA
350 ROYAL POINCIANA WAY
PALM BEACH, FL. 33480

SUBJECT: ETOILE PLACEMENT S.A.
Ref. Number: W96000016218

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DIVISION OF CORPORATIONS
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We have received your document for ETOILE PLACEMENT S.A. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$70.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

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.

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

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: 796A00037165



FLORIDA DEPARTMENT OF STATE

Sandra E. Mortham
Secretary of State

August 13, 1996

AMY TEITELBAUM
5C ROYAL POINCIANA PLAZA
350 ROYAL POINCIANA WAY
PALM BEACH, FL 33480

SUBJECT: ETOILE PLACEMENT S.A.
Ref. Number: W96000016218

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
56 AUG 19 2:11:28

We have received your document for ETOILE PLACEMENT S.A. and your check(s) totaling \$70.00. 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.

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: 496A00038383

**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. ETOILE PLACEMENT S.A
(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. REPUBLIC OF LIBERIA
(State or country under the law of which it is incorporated)
3. _____
(FBI number, if applicable)
4. October 9, 1991
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. upon Qualification
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. 52 MING FUNG STREET 4/F, KOWLOON, HONG KONG
(Current mailing address)
8. Securities - Investment
(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:** (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: AMY TEITELBAUM

Office Address: 5 C ROYAL POINCIANA PLAZA
350 ROYAL POINCIANA WAY
PALM BEACH, Florida, 33480
(Zip Code)

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.

Amy Teitelbaum
(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.

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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: LAI CHUEN CHOI

Address: 52 MING FUNG STREET 4/F
KOWLOON, HONGKONG

Vice Chairman: SET YUE NG

Address: 52 MING FUNG STREET 4/F

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: LAI CHUEN CHOI

Address: 52 MING FUNG STREET 4/F
KOWLOON, HONGKONG

Vice President: _____

Address: _____

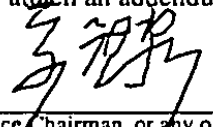
Secretary: SET YUE NG

Address: 52 MING FUNG STREET 4/F
KOWLOON, HONGKONG

Treasurer: _____

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)

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DIVISION OF CORPORATIONS
26 AUG 19 AM 11:28

**THE REPUBLIC OF LIBERIA
MINISTRY OF FOREIGN AFFAIRS**

R-22413

CERTIFICATE OF GOODSTANDING

I HEREBY CERTIFY that I have made a diligent examination of the files of the Articles of Incorporation as defined by § 1.2 (a) of the Business Corporation Act filed with this Ministry for articles, orders or records of a dissolution of

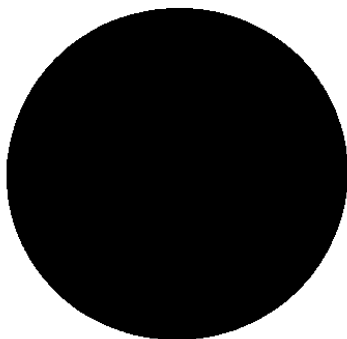
ETOILE PLACEMENT S.A.

the Articles of Incorporation of which were filed

October 9, 1991

and that upon such examination, I find no such articles, orders or records, and that so far as indicated by the records of this Ministry, such corporation remains a subsisting corporation in goodstanding.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 AUG 19 AM 11:28



WITNESS my hand and the official seal of the Ministry of Foreign Affairs this 30th day of July of One Thousand Nine Hundred and Ninety-six.




By Order of the Minister of Foreign Affairs



The International Trust Company of Liberia
Deputy Registrar of Corporations
Authorized Signature