

F96000004694

TO: Qualification Tax Lien Section
Division of Corporations

SUBJECT: John Rima Designs, Ltd.
(Name of corporation - must include suffix)

200001949692
-09/17/96--01155--012
*****600.00 *****600.00

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:

John Rima
(Name of Person)

John Rima Designs, Ltd.
(Firm/Company)

151 Chilian Ave.
(Address)

Palm Beach FL 33480
(City/State/Zip)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200001949692
-09/17/96--01155--013
*****70.00 *****70.00

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

John Rima at (407)
(Name of Person) (Area Code & Daytime Telephone Number)

200001949692
-09/17/96--01155--014
*****8.75 *****8.75

835-6854
835-6938

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

IMPORTANT NOTICE CONCERNING
\$1000 PENALTY FEE

THE FLORIDA DEPARTMENT OF STATE
WILL WAIVE THE \$1000 PENALTY FEE
IMPOSED UNDER SECTION 607.1502(4) OR
SECTION 617.1502(4), FLORIDA STATUTES,
FOR ANY FOREIGN CORPORATION WHICH
APPLIES FOR A CERTIFICATE OF
AUTHORITY BETWEEN **JULY 1, 1996** AND
DECEMBER 31, 1996. (LAWS OF FLORIDA 96-212)

THE CORPORATION STILL MUST PAY ALL
FILING FEES AND ANNUAL REPORT FEES
THAT WOULD HAVE BEEN DUE IF THE
CORPORATION HAD PROPERLY
QUALIFIED.

**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. John Rima Donigno Ltd. Z LLC.
(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. 13-3409208
(State or country under the law of which it is incorporated) (FBI number, if applicable)
4. April 4, 1987 5. Perpetual
(Date of Incorporation) (Duration. Year corp. will cease to exist or "perpetual")
6. January 1994
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. 324 Royal Palm Way, Suite 227
Palm Beach FL 33480
(Current mailing address)
8. Antique Dealer & Interior Decorator
(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)**

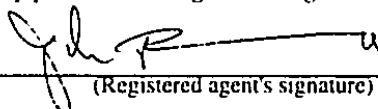
Name: John Rima

Office Address: 151 Chilian Ave.

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.


(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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TALLAHASSEE, FLORIDA

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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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

President: John Rima

Address: 151 Chilian Ave.

Palm Beach FL 33480

Vice President: n/a

Address: _____

Secretary: same as above

Address: _____

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. John Rima

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

State of New York | ss:
Department of State

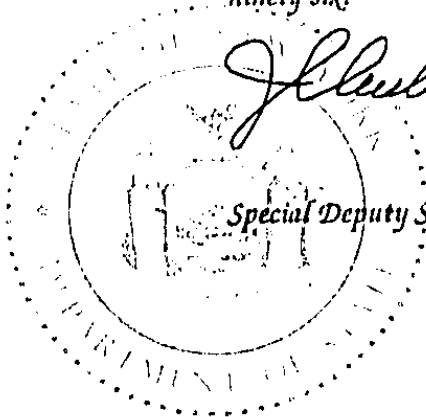
I hereby certify, that the certificate of incorporation of JOHN RIMA DESIGNS LTD. was filed on 03/19/1987, with perpetual duration, and that a diligent examination has been made of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal
of the Department of State at the City
of Albany, this 19th day of August
one thousand nine hundred and
ninety-six.



Special Deputy Secretary of State

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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