

F96000005455

TRANSMITTAL LETTER

TO: Qualification/Registration Section
Division of Corporations

SUBJECT: ORON DEVELOPMENT UNION (USA) INC.
(Name of Corporation)

500001929775
-08/22/96--01067--002
*****78.75 *****78.75

W96-17697

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

ITA NTEKIM
(Name of Person)

(Firm/Company)

19461 NW 7 ST
(Address)

PEMBROKE PINES FL 33029
(City, State and Zip Code)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 OCT 22 AM 9:02

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10/22

For further information concerning this matter, please call:

ITA NTEKIM at 305 (954) 416-1053
(Name of Person) Area Code & Daytime Telephone Number

COURIER ADDRESS:

Qualification/Tax Lien Section
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 22, 1996

ITA NTEKIM
%ORON DEVELOPMENT UNION (USA) INC.
19461 NW 7TH ST.
PEMBROKE PINES, FL 33029

SUBJECT: ORON DEVELOPMENT UNION (USA) INC.
Ref. Number: W96000017697

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We have received your document for ORON DEVELOPMENT UNION (USA) 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):

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.

Please be advised that this office requires that a foreign corporation submit an original certificate of existence (good standing) instead of a certificate of incorporation.

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: 096A00040004



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

September 13, 1996

ITA NTEKIM
%ORON DEVELOPMENT UNION (USA) INC.
19461 NW 7TH ST.
PEMBROKE PINES, FL 33029

SUBJECT: ORON DEVELOPMENT UNION (USA) INC.
Ref. Number: W96000017697

We have received your document for ORON DEVELOPMENT UNION (USA) 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 certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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: 796A00042631

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**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR
AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR
AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:**

1. DRON DEVELOPMENT UNION (USA) INC.
(Name of corporation: must include the word "INCORPORATED" or "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. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. Georgia
(State or country under the law of which it is incorporated)
3. 58-2117337
(FBI number, if applicable)
4. SEPTEMBER 26, 1995
(Date of incorporation)
5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual")
6. JULY 1, 1996
(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 617.155, F.S.)
7. 19461 NW 7 ST
PEMBROKE PINES, FL 33029
(Current mailing address)
8. CONTRIBUTE TOWARDS ECONOMIC, SOCIAL AND CULTURAL PROGRESS OF
ORON, NIGERIA. SPONSOR EVENTS TO PROMOTE ORON CULTURAL
HERITAGE IN U.S.A.
(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:

ITA NTEKIM
(Name)
19461 NW 7 ST
(Office address)
PEMBROKE PINES, Florida, 33029
(City) (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.

Ita Ntekin
(Registered agent's signature)

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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)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: ITA NTEKIM

Address: 19461 NW 7 ST
PEMBROKE PINES, FL 33029

Vice Chairman: DANIEL ABIA

Address: 19210 NW 10 AVENUE
MIAMI, FL 33169

Director: _____

Address: _____

Director: _____

Address: _____

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

President: SONNY ABIA

Address: 19210 NW 10 AVE.
MIAMI, FL 33169

Vice President: KATHERINE NTEKIM

Address: 19461 NW 7 ST
PEMBROKE PINES, FL 33029

Secretary: KATHERINE NTEKIM

Address: 19461 NW 7 ST PEMB. PINES FL

Treasurer: KATHERINE NTEKIM

Address: 19461 NW 7 ST PEMB. PINES FL 33029

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

13. [Signature] Ita Ntekim [Signature] Katherine
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

ESIN DANIEL ABIA, ITA NTEKIM, SONNY D. ABIA, K. NTEKIM
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

Secretary of State
Business Information and Services
Suite 315, West Tower
2 Martin Luther King Jr. Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 962850024
CONTROL NUMBER : 9407490
DATE INC/AUTH/FILED: 03/22/1994
JURISDICTION : GEORGIA
PRINT DATE : 10/11/1996
FORM NUMBER : 211

FLORIDA SECRETARY OF STATE
DIVISION OF CORPORATIONS
P O BOX 6327
TALLAHASSEE FL 32314

CERTIFICATE OF EXISTENCE

I, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

ORON DEVELOPMENT UNION (U.S.A.), INC. (A NON-PROFIT CORPORATION)
A DOMESTIC NONPROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation, or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up, or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Lewis A. Massey
LEWIS A. MASSEY
SECRETARY OF STATE

