# F9600005867

TO: Qualification/Tax Lien Section **Division of Corporations** JUATSA LINDUSTRIES LTD, Inc. (Name of corporation - must include sulfix) 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: Samuel J. Brunt
(Name of Person) Brunt + Company 3550 Biscarne Blvd., #607

(Address)

Miami, Florida 33137

(City/State/Zip) Should you need to call someone concerning this matter, please call: Samuel J. Brunt at 305, 576-0888 (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

# 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.	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.)	
• •	(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or	_
	words or appreviations of like import in language as will clearly indicate that it is a corporation instead of a	
2	(State or country under the law of which it is incorporated)  (State or country under the law of which it is incorporated)  (Fill number, if applicable)	
4.	(State or country under the law of which it is incorporated)  (State or country under the law of which it is incorporated)	_
	(Date of Incorporation)  (Date of Incorporation)  (Duration: Year corp. will cease to exist or "perpetual")	
4.	(Date of Incompration)	
	"perpetual")	
6.	(Date first transacted business in Florida, (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)	말
	(Date first transacted ousiness in Florida, (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)	
-	QUIT N. N. LLNOS R.	모취
7.	(Date first transacted dusiness in Florida, (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)	_일종길
	KINGSTON 6 Jamaica 3	57
	KINGSTON 6 JAMATEA	5.4
	(Current mailing address)	77
	ال <i>ن</i>	중교
8	Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	, <i>3</i> 7
	(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: GALO ENCALASA	
	Office Address: 2801 NW 74 AVE A 207	
	<u> 「                                   </u>	
10	Registered agent's acceptance:  , Florida, 33122.  (Zip Code)	
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.		
	GE: SISSUL	
	(Registered agent's signature)  Attached is a certificate of existence duly outherstands are not also as a second 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.

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) BECILEORY Chairman: Or7 390tc Address: KINDATION G I mm AI CA Vice Chairman: Address: MPSON Director: \_\_\_ 1 AVISTOCIO Address: GREACE WOTEDWI Director: \_\_ Address: \_\_\_\_\_ B. OFFICERS (Street address only- P. O. Box NOT acceptable) BE CILTORA LEO N President: HOPE Address: 12, NOTSTON JAM A-IC A Vice President: Address: \_\_\_\_\_ Secretary: 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) BECKFORD 000N -MARMAN

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



# CERTIFICATE OF THE INCORPORATION OF A COMPANY

I hereby Certify that

## YUATSA INDUSTRIES LIMITED

was Incorporated under the

Companies Act as a Limited Company

on the TWENTIETH day of OCTOBER

One Thousand Nine Hundred and Ninety-four.

Given under my hand at Kingston this EIGHTH day of

NOVEMBER One Thousand Nine Hundred and Ninety-four.

/s/ C. Morgan-Greaves
Actg. Registrar of Companies

Registrar of Companies

No. of Company 50,445

Certified to be a true copy of the Certificate of Incorporation.

October 24, 1996

SECRETARY OF STATE
DIVISION OF CORPORATIONS

AM 9: 56