To: Qualification Fax Lien Section Division of Corporations

SUBJECT: MOULOS AND	SON INC.	
(Name of corporation - must include suffix)		
Dear Sir or Madam:	W98-9739	
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:		
Vasilies Skoulidas		
(Name of	Person) 8000025064488 -04/30/9801048004	
Moulos and So	on <u>Lnc.</u> *****61.25 *****61.25	
(Firm/Co	mpany) 8000025064488	
7747 N Tring	**************************************	
(Address)		
Skokie, II. 60076		
(City/State/Zip)		
Should you need to call someone concerning this matter, please call:		
Vasilies Skoulidas at (773) 465-4333/home (847) 679-1860 (Name of Person) (Area Code & Daytime Telephone Number)		
	2-1	
COURIER ADDRESS:	MAILING ADDRESS: $\frac{4}{5}\sqrt{2}$	
Qualification/Tax Lien Section	Qualification/Tax Lien Section	
Division of Corporations	Division of Corporations	
409 E. Gaines St.	P.O. Box 6327	

Tallahassee, FL 32399

Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 30, 1998

VASILIOS SKOULIDAS MOULOS AND SON INC. 7747 N. TRIPP SKOKIE, IL 60076

SUBJECT: MOULOS AND SON INC.

Ref. Number: W98000009739

We have received your document for MOULOS AND SON INC. and check(s) totaling \$61.25. 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 \$8.75. 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. (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.)

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 (850) 487-6093.

Freta Lott Corporate Specialist Supervisor

Letter Number: 698A00023751



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 19, 1998

VASILIOS SKOULIDAS MOULOS AND SON INC. 7747 N. TRIPP SKOKIE, IL 60076

SUBJECT: MOULOS AND SON INC.

Ref. Number: W98000009739

We have received your document for MOULOS AND SON INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

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 (850) 487-6093.

Letter Number: 198A00027854

Freta Lott Corporate Specialist Supervisor \$ 1 '' Î

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

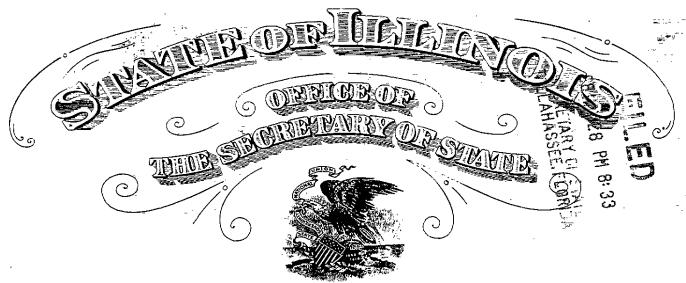
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) less in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S. (Current mailing address) fion authorized in home state or country to be carried out in state of Florida) of Florida registered agent; (P.O. Box or Mail Drop Box NOT acceptable) 9. Name and str William E. Touloumis Office Address: Florida. 33 (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-add-complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. 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: Address: Vice Chairman: Address: Director: Address: ___ Director: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: Vasilios Skoulidas Address: 7747 N. Triff Skokie II. 60076 Vice President: Address: _____ Secretary: _ Address: __ Address: _____ NOTE: Af necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. Vasilios Skoulidar (Typed or printed name and capacity of person signing application)

File Number 5516-456-8



To all to whom these presents Shall Come, Greeting:

I, George H. Ryan, Secretary of State of the State of Illinois,

do hereby certify that MOULOS & SON, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE JULY 22, 1988, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS*******



In Cestimony Whe	rrof, I hereto set
my hand and cause to be a	lfixed the Great Seal of
the State of Illinois this	27TH
day of	A.D., 19 <u>98</u>

George H Ryan SECRETARY OF STATE