

# F98000003938

## TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: DELISKA WEST

(Name of corporation - must include suffix)

100002552311--8

-06/09/98--01026--002  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Dear Sir or Madam:

100002552311--8

-07/10/98--01081--001  
\*\*\*\*\*8.75 \*\*\*\*\*8.75

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:

DIMITRI J HALLER-DASKALIDES

(Name of Person)

Deliska West, Inc.

(Firm/Company)

8321 W. Sahara Ave, Suite 2180

(Address)

Las Vegas, NV. 89117

(City/State/Zip)

W98-13190

JP9/10

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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

William A. Pappas at (702) 242-1507

(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

June 9, 1998

DIMITRI J. HALLER-DASKALIDES  
DELISKA WEST, INC.  
8321 W. SAHARA AVE., STE. 2180  
LAS VEGAS, NV 89117

SUBJECT: DELISKA WEST, INC.  
Ref. Number: W98000013190

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DIVISION OF CORPORATIONS  
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We have received your document for DELISKA WEST, INC. and your check(s) totaling \$70.00. 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. (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) 487-6095.

Jennifer Sindt  
Document Examiner

Letter Number: 498A00032313

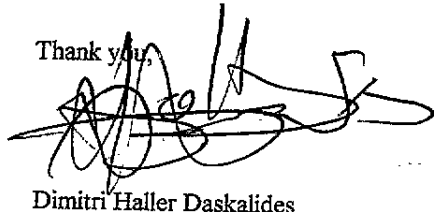
July 3, 1998

Deliska West  
13166 72<sup>nd</sup> Terrace North  
Seminole, FL 33776

State of Florida  
Qualification \ Tax Lien Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Please send us a Certificate of Status. A check for \$8.75 is enclosed.

Thank you,

A handwritten signature in black ink, appearing to read "Dimitri Haller Daskalides", written over a horizontal line.

Dimitri Haller Daskalides

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DIVISION OF CORPORATIONS  
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**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. Deliska West, Inc.  
(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. Nevada  
(State or country under the law of which it is incorporated)
3. 88-0375092  
(FEI number, if applicable)
4. Sept. 19, 1997  
(Date of incorporation)
5. Perpetual  
(Duration: Year corp. will cease to exist or "perpetual")
6. June 1st 1998  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 8321 West Sahara Ave, Suite 2180  
Las Vegas Nevada 89117  
(Current mailing address)
8. Wholesale Chocolate Sales  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  
Name: Dimitri Haller-Dastalides  
Office Address: 13166 72nd Terrace North  
Seminole, Florida, 33776  
(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.

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: Dimitri HALLER-DASKALIDES

Address: 13166 72 ND Terr N  
Seminole FLORIDA 33776

Vice Chairman: William A. Pappas

Address: 330 S. Decatur Blvd #221  
Las Vegas, NV 89107

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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

President: Dimitri Haller-Daskalides

Address: 13166 72 ND Terr. N  
Seminole FL 33776

Vice President: William A. Pappas

Address: 330 S. Decatur Blvd. #221  
Las Vegas, NV 89107

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: William A. Pappas

Address: Same as Above

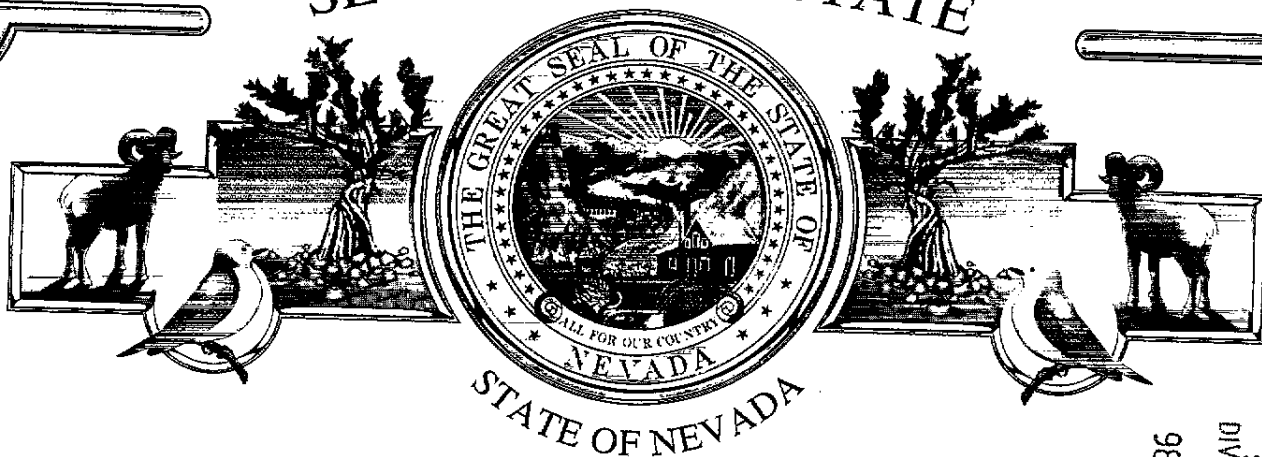
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DIVISION OF CORPORATIONS  
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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. William A. Pappas  
(Typed or printed name and capacity of person signing application)

# SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS  
98 JUL 10 PM 2:11

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **DELISKA WEST, INC.** as a Corporation Company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since September 19, 1997, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Las Vegas, Nevada, on June 29, 1998.



*Dean Heller*  
Secretary of State  
By *Delanne Mayne*  
Certification Clerk