

F98000004334

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Poludin Sr, inc
(Name of corporation - must include suffix)

500002590155--9

Dear Sir or Madam:

-07/15/98--01088--003

*****78.75 *****78.75

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:

W98-16117

Oleg Poludin
(Name of Person)

Poludin Sr, inc
(Firm/Company)

1634 SE Higdon Ct. Pt. St. Lu
(Address)

Pt. St. Luie FL 34952
(City/State/Zip)

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

Boris Poludin at (561) 335-8183
(Name of Person) (Area Code & Daytime Telephone Number)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 JUL 30 AM 8:42

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W98/30

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

July 15, 1998

OLEG POLUDIN
POLUDIN SV, INC.
1634 SE HIGDON CT.
PORT ST LUCIE, FL 34952

SUBJECT: POLUDIN SV, INC.
Ref. Number: W98000016117

We have received your document for POLUDIN SV, 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 entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A brief description of the entity's nature of business must be included in the document.

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) 487-6958.

Lee Rivers
Document Specialist

Letter Number: 498A00037723

**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. Poludin SV, 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. NY 3. 650793946
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 06-10-1997 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 06-10-1998
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 1634 SE Weldon Ct.
Pt. St Lucie FL 34952
(Current mailing address)
8. import & export (clothe, souvenirs)
(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: Oleg Poludin

Office Address: 1634 SE Weldon Ct
Pt. St Lucie FL 34952, Florida, 34952
(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.

Oleg Poludin
(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)

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TALLAHASSEE FLORIDA

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

Chairman: Oleg Poludin

Address: 1634 SE Wigdon Ct.
Pt. St. Lucie FL

Vice Chairman: _____

Address: _____

Director: Oleg Poludin

Address: the same

Director: _____

Address: _____

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TALLAHASSEE FLORIDA

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

President: Oleg Poludin

Address: 1634 SE Wigdon Ct.
Pt. St. Lucie FL 34952

Vice President: _____

Address: _____

Secretary: Boris Poludin

Address: 1889 Burning st.
Pt. St. Lucie FL 34985

Treasurer: _____

Address: _____

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

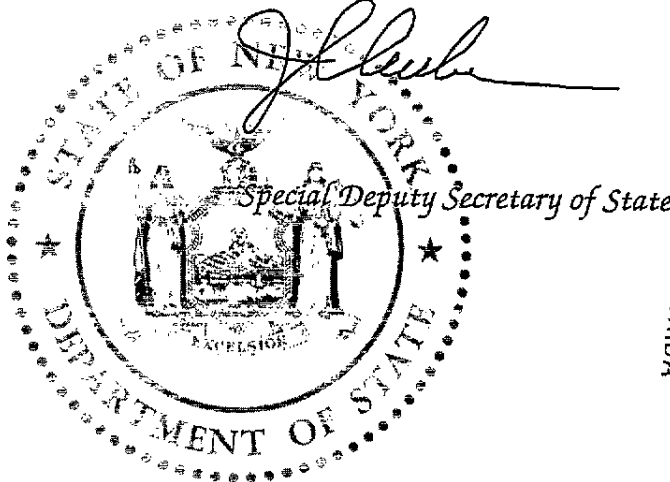
13. Oleg Poludin
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. OLEG POLUDIN (president)
(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 POLUDIN SV, INC. was filed on 06/10/1997, 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 06th day of July
one thousand nine hundred and
ninety-eight.*



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TALLAHASSEE FLORIDA