# F98000000 4849

emmer. (	GREAT DELIGHT LTD	
SUBJECT: _	(Name of corporation - must include suffix)	
Dear Sir or Ma	·	•
Certificate of ransact busine		ess in Florida", eign corporation to
'lease return a	Il correspondence concerning this matter to the following:	
	BORIS RÓSEN (Name of Person)	
	ROSEN AND COMPANY CPA, PA	9
	(Firm/Company)	— 8 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
	25 SE 2nd AVENUE, SUITE 220	SECRETAR IVISION OF 27 98 AUG 27
	(Address)	
	MTAMI, FLORIDA 33131 (City/State/Zip)	AMII: 02
hould you nee	a to can someone concerning this matter, please can:	002616118- -08/14/98010390 ******70.00 ******7
BORIS ROS	SEN 305 374-2001	W98-1855
(Name	e of Person) (Area Code & Daytime Telephone Nu	

# **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 14, 1998

BORIS ROSEN ROSEN & COMPANY CPA PA 25 SE 2ND AVENUE, STE 220 MIAMI, FL 33131

SUBJECT: GREAT DELIGHT LTD Ref. Number: W98000018555

We have received your document for GREAT DELIGHT LTD 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 corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 487-6097.

Michael Mays Document Specialist

Letter Number: 298A00042312

98 AUG 27 AM II: 02

# 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.	GREAT DELIGHT LTD COMPANY		
	(Name of corporation; must include the word "INCORPORATED" "COMPANY" "CORPORATION" or		<del></del>
	words of appreviations 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.	BRITISH VIRGIN ISLANDS  (State or country under the law of which it is incorporated)  3. #PPCICAL FOR THE INCOMPANY (FEI number, if applicable)		
	(State or country under the law of which it is incorporated) (FEI number, if applicable)		
4.	JULY 28, 1997  (Date of incorporation)  5. PERPETUAL  (Duration: Year corp. will cease to exist or "perpetual")		
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")		
6.	AUGUST 1,1998 .		م د. د
	(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	98	-8."
7.	IN CARE OF BORIS ROSEN, CPA	AU(	
	25 SE 2nd AVENUE, SUITE 220, MIAMI, FLORIDA 33131	27	A
	(Current mailing address)		37.
		<b>=</b>	್ಷಾಬ
ī	REAL_ESTATE INVESTMENTS	MII: 0:	<b>≨</b> ₹
٠.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	ವಿ	<u> </u>
	( Transfer out in state of Florida)		S
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable	)	
	Name: BORIS ROSEN		
Of	fice Address: 25 SE 2nd AVENUE, SUITE 220		
	MTANT		
	, Florida, 33131		
	(Zip code)		
10	. Registered agent's acceptance:		
	•		
Ha ·	wing been named as registered agent and to accept service of process for the above stated corporation at the pl this application. I hereby accept the appointment of the plant of the plant is application.	ace di	esienated
	"IF" "IF" " " I TO TO WELLOW WELLOW WE WOUND WITH AN I POPULATION AGOND AND AND AND AND AND AND AND AND AND A		_
	mply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am d accept the obligations of my position as registered agent.	famil	iar with

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.

2. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)  DIRECTORS (Street address only - P.O. Box NOT acceptable)		
DIRECTORS (Street address only - P.O. Box NOT acceptable)		
ddress:		<u> </u>
ice Chairman:	·	
ddress:		
irector: EDILMA CAMARGO		
ddress: No. C-6, Villa de Las Fuentes, Panama, Republic of Panama.		
rector: MARIXENIA CORREA VASQUEZ		
diress: No. 119, 9th C North Street, Club X, Panama, Republic of Po	anama	•
	·	
OFFICERS (Street address only - P.O. Box NOT acceptable)		
esident: EDILMA CAMARGO	· 😸	<u> </u>
idress: No. C-6, Villa de Las Fuentes, Panama, Republic of Panama.	- 8	SEC.
	72	
ce President:	<b>P</b>	200 200
ldress:	— <del>=</del>	STATE
		ऊ
		-
cretary.MARIXENIA CORREA VASQUEZ	nama.	
cretary.MARIXENIA CORREA VASQUEZ idress: No. 119, 9th C North Street, Club X, Panama, Republic of Pa		
idress: No. 119, 9th C North Street, Club X, Panama, Republic of Pa		
idress: No. 119, 9th C North Street, Club X, Panama, Republic of Pa		
idress: No. 119, 9th C North Street, Club X, Panama, Republic of Pa		
idress: No. 119, 9th C North Street, Club X, Panama, Republic of Pa		
idress: No. 119, 9th C North Street, Club X, Panama, Republic of Pa		

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

# **APOSTILLE**

(Convention de la Haye du 5 Octobre 1961)

1. Country:

British Virgin Islands

This public document

2. has been signed by:

Juliette Penn

3. acting in the capacity

of:

**Notary Public** 

4. bears the Seal of:

Juliette Penn

**CERTIFIED** 

5. at:

Deputy Governor's Office

This 7 day of

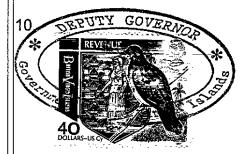
1998

6. on: 7. by:

**Deputy Governor** 

D48237 8. No.:

9. Seal/Stamp



Signature:

# NOTARIAL CERTIFICATE

I, Juliette Penn, Notary Public, appointed for life, duly sworn and practicing in Road Town, Tortola, British Virgin Islands, DO HEREBY CERTIFY and ATTEST that on this day appeared before me Ms. Angela Ng Arcia who is personally known to me and who as the authorized signatory of Arias, Fabrega & Fabrega Trust Co. BVI Limited the Registered Agent of GREAT DELIGHT LTD., has executed the attached Certificate of Incumbency on its behalf and the same has been acknowledged and sufficiently evidenced before me.

IN FAITH AND TESTIMONY I the said Notary hereto sign my name and avail where helpful.

Dated the Mday of

JULY

, 1998.

Juliette Penn Notary Public

British Virgin Islands

MY COMMISSION IS FOR LIFE

# **APOSTILLE**

(Convention de la Haye du 5 Octobre 1961)

1. Country:

This public document

2. has been signed by:

3. acting in the capacity of:

4. bears the Seal of:

British Virgin Islands

Lorn C. Greene

Acting Assistant Registrar of Companies

Registrar of Companies

#### **CERTIFIED**

5. at:

6. on:

7. by:

Deputy Governor's Office

This 7 day of

**Deputy Governor** 

DIVISION OF CORPORATION OF CORPORATI

8. No.: D48236

9. Seal/Stamp



Signature:

## **GREAT DELIGHT LTD.**

#### **CERTIFICATE OF INCUMBENCY**

We, ARIAS, FABREGA & FABREGA TRUST CO. BVI LIMITED, of Wickham's Cay, Road Town, Tortola, British Virgin Islands, HEREBY CERTIFY

THAT we are the Registered Agent for GREAT DELIGHT LTD., a company duly incorporated and in good standing under the International Business Companies Ordinance, 1984 as amended;

THAT the following person are the duly appointed Directors and Officers of the Company:

EDILMA CAMARGO MARIXENIA CORREA VASQUEZ DIRECTOR / PRESIDENT DIRECTOR / TREASURER

Done and signed this 6th day of July, 1998 in Road Town, Tortola, British Virgin Islands.

Arias, Fabrega & Fabrega Trust Co. BVI Limited

By:

Angela Ng/Arcia uthorized/signatory 98 AUG 27 AM II: 0

SECRETARY OF STATE