F980000055443

To: Qualification/Tax Lien Section Division of Corporations	
SUBJECT: FIRST CORPORATE SEDANS INC (Name of corporation - must include suffix)	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Busines "Certificate of Existence", and check are submitted to register the above referenced foreign transact business in Florida.	ss in Florida", gn corporation to 550980——2 '98—01015—016 '0.00 *****70.00
and makes to the control of the cont	
	w98-26877
TT2HAK COHEN. CPA (Firm/Company)	
50 LEXINGTON AVE # 25H (Address)	88 86 SANG.
NEW YORK, NY, 10010. (City/State/Zip)	FILI RETARY P 29
Should you need to call someone concerning this matter, please call:	OF STATE ONS AM 10: 14
TT2HAK COHEN. at (2/2) 254 5089. (Name of Person) (Area Code & Daytime Telephone Num	uber) 47th
	9/29

STREET 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

September 14, 1998

ITHAK COHEN ITHAK COHEN PA 50 LEXINGTON AVE #25H NEW YORK, NY 10010

SUBJECT: FIRST CORPORATE SEDANS, INC

Ref. Number: W98000020877

We have received your document for FIRST CORPORATE SEDANS, INC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$70.00.

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: 498A00046452

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. FIRST CORPORATE SEDANS 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. NEW YORK 3. 13-3693/20
(State or country under the law of which it is incorporated)

4. 7/1/93 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 7/15/98
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 7. 60 EAST 42 nd STREET # 2424

NEW YORK, NY, 1016 5

(Current mailing address) SERVISE

(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: AMIR BEN-210N. Office Address: 300 SOUTH POINT DR. #705

MIAMI BEACH, FL, 33/, Florida, 33/39

(Zin 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

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.

comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with

(Registered agent's signature)

and accept the obligations of my position as registered agent.

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: AMIR BEN-20N.
Address: 300 SOUTH POINT Dr. # 705
. MIAMI BEACH, FL, 33/39
Vice Chairman: JONE
Address:
Director:
Address:
Director: No N C
Address:
S SC ST SC ST
B. OFFICERS (Street address only - P.O. Box NOT acceptable)
President: AMIR BEN-ZION = 300
Address: 300 SOUTH POINT DR #705
MIAMI BEACH, FL 33/09
Vice President:
Address:
Secretary: SAME
Address:
Treasurer: SAME
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. (Signature of Chairman, Wise Chairman, or any officer listed in number 12 of the application)
(Signature of Chairman, west Chairman, or any officer listed in number 12 of the application)

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

State of New York Department of State | ss:

I hereby certify, that the certificate of incorporation of FIRST CORPORATE SEDANS, INC. was filed on 12/09/1992, under the name of B.Z. MANAGEMENT, INC., 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.

A Certificate of Amendment B.Z. MANAGEMENT, INC., changing name to FIRST CORPORATE SEDANS, INC., was filed 12/23/1997.

Witness my hand and the official seal of the Department of State at the City of Albany, this 05th day of August OF Dine thousand nine hundred and ninety-eight.

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