# COO Opplification (Pegistration Section)

TO: Qualification/Registration Section Division of Corporations

SUBJECT: NEW BEGINNINGS INTERNATIONAL TRAINING CENTER

700002840067--2 -04/15/39--01065--001 \*\*\*\*\*70.00 \*\*\*\*\*\*70.00

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conducts its affairs in Florida.

Please return all correspondence concerning this matter to the following:				
SCOTT A. OLSON (Name of Person)  (9. 70)				
(Name of Person)				
NEW BEGINNINGS INTERNATIONAL TRAINING CENTER (Firm/Company)				
9220 ESTATE COVE CIRCLE  (Address)				
(Address)				
RIVERVIEW, FL 33569 W B SEE City, State and Zip Code) W 200 8 SEE CODE				
For further information concerning this matter, please call:				
SCOTT A. OLSON at (8/3) 626 9679  (Name of Person) Area Code & Daytime Telephone Number				
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				
Enclosed is a check for the following amount:				
\$70.00 Filing Fee \$\Bigcup \text{\$78.75 Filing Fee & Box Certificate of Status} \Bigcup \text{\$78.75 Filing Fee & Box Certified Copy} \Bigcup \text{\$87.50 Filing Fee, Certificate of Status & Certified Copy} \Bigcup \text{\$87.50 Filing Fee, Certificate of Status & Certified Copy} \Bigcup \text{\$87.50 Filing Fee, Certificate of Status & Certified Copy} \Bigcup \text{\$87.50 Filing Fee, Certificate of Status & Certified Copy} \Bigcup \text{\$87.50 Filing Fee, Certificate of Status & Certified Copy} \Bigcup \text{\$87.50 Filing Fee, Certificate of Status} \Bigcup \Bigcup \text{\$87.50 Filing Fee, Certificate of Status} \Bigcup \Bi				



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 16, 1999

SCOTT A. OLSON NEW BEGINNINGS INTL TRAINING CENTER 9220 ESTATE COVE CIRCLE RIVERVIEW, FL 33569

SUBJECT: NEW BEGINNINGS INTERNATIONAL TRAINING CENTER, INC. Ref. Number: W99000009128

We have received your document for NEW BEGINNINGS INTERNATIONAL TRAINING CENTER, 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:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$1,061.25.

Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a sworn affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501 or 617.1501, Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers Document Specialist

Letter Number: 599A00019621

# NEW BEGINNINGS INT'I TRAINING CENTERS, INC.

"Training Leaders in Excellence & Integrity"



April 22, 1999

Mr. Lee Rivers
Division of Corporations
Florida Department of State
409 E. Gaines Street
Tallahassee, FL 32399

Subject: New Beginnings International Training Center, Inc.

Ref. Number: W99000009128

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Dear Mr. Rivers:

I hereby swear, on this affidavit, that erroneous information was listed on the application for qualification for the State of Florida for New Beginnings International Training Center, Inc.

I also swear that the date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501 or 617.1501, Florida Statutes.

I also swear that according to Florida Statutes 607.1501 and 617.1501, New Beginnings International Training Center, Inc., has not yet begun to transact any business in the state of Florida.

I affix my signature to this sworn affidavit.

Sincerely,

Scott Olson

New Beginnings International Training Center, Inc.

9220 Estate Cove Circle

Riverview, FL 33569

(813) 626-9679

STATE OF FLORIDA COUNTY OF HILLSBOROUGH

Sworn to (or affirmed) and subscribed before me on this 22 day of April 1999.

by Scott Olson

He/She is personally known to me or has produced F/ Orivers Lis. as identification.

TRACI STONE Notary Public, State of Florida My comm. expires Jan. 15, 2600 Comm. No. CC524714

# APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1.	NEW BEGINNINGS INTERNATIONAL TRAINING CENTER INC			
	(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" of 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. "Company" or "Co." may not be used as corporate suffix by a nonprofit corporation.)	l a		
2.	PENNSY WAN'I A  (State or country under the law of which  3. 23 - 2832749  (FEI number, if applicable)			
	it is incorporated)			
4.	No Vember 3, 1995  (Date of Incorporation)  5. PERPETVAL  (Duration: Year corp. will cease to exist or "perpetual")			
	(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")	DIVISION 99 APR		
6.	SEPTEMBER 22, 1998	IVISION (		
	See sections 617.1501, 617.1502, and 817.155, F.S.)	26		
7.	P.O. BOX 172516			
	P. o. Box 172516  TAMPA, FL 33672-0516  (Current mailing address)			
(Current mailing address)				
a Administração de punta a constructor SU ARINE				
8. ADMINISTRATION PURCHASING SHAPING (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)				
9. Name and street address of Florida registered agent:				
SCOTT A. OLSON (Name)				
	(Name)	-		
	9220 ESTATE COVE CIRCLE (Office address)			
	Riverview, Florida, 33569 (City) (Zip Code)			
	(City) (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				
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.				
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(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.

<ul><li>12. Names and addresses of officers and/or directors: (Street address only- P. O. NOT acceptable)</li><li>A. DIRECTORS (Street address only- P. O. Box NOT acceptable)</li></ul>	). Box
Chairman: Rev. Bob Hoccard	مسابق المحادث
Address: 1324 BRAHMA DR. JW	•
VALICIO, PC 33594	
- CAA	
Vice Chairman: Military of Control	कृति । <del>क्ष</del> e e e e e e e e e e e e e e e e e e e
Address: 1224 BRAH	
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Director:	
Address:	D V
	SECRE ISION I
Director:	R SE
Address:	o
There is a second of the secon	
B. OFFICERS (Street address only- P. O. Box NOT acceptable)	44
President: Pev. BOB HOLLAND	9 0 <b>.</b>
Address: 1324 BRAHMA DR.	97
VALRICO, FZ 33594	
Vice President: REV. MARY HOLLAND	र्रह के ल≛ं स्क्रीत के काईक ३
1224 BRAHMA DR.	#
VALRICO, FL 33594	ル で <u>神</u> 経学( <u>報</u>
VII V	
Secretary: PHIL NEFF	46112
Address: 6843 PEBBLEBROOK CT. BROWNSBURG, IN	
Treasurer: SAME AS SECRETARY	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing addition and/or directors.	nal officers
13. Per. Bob Holland (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	•
REV. BOB HOLLAND, PRESIDENT  (Typed or printed name and capacity of person signing application)	a de la conseguir de la conseg

# COMMONWEALTH OF PENNSYLVANIA

# DEPARTMENT OF STATE

APRIL 08, 1999

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

DIVISION APR 26 PM 1: 19

I DO HEREBY CERTIFY THAT,

### NEW BEGINNINGS INTERNATIONAL TRAINING CENTER

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Kim Liggingulli

ACTING

Secretary of the Commonwealth