

F99000002953
TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: TOP. STAR. BUSINESS AND DEVELOPMENT INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

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:

Mme VIVIANE SEEL
(Name of Person)
Company
(Firm/Company)
1913 South Ocean Drive
(Address)
Suite 325 - HALLANDALE - 33009 - FLORIDA -
(City/State/Zip)

99 JUN -7 PM 12:14

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

mtm
6/9

300002876979--3
-05/17/99--01082--005
*****87.50 *****87.50

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

W99-11698

VIVIANE SEEL at (954) 456-6782
(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 ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

May 19, 1999

MME VIVIANE SEEL
COMPANY
1913 SOUTH OCEAN DRIVE, STE 325
HALLANDALE, FL 33009

SUBJECT: TOP STAR BUSINESS AND DEVELOPMENT INC
Ref. Number: W99000011698

We have received your document for TOP STAR BUSINESS AND DEVELOPMENT INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the corporate name on line #1 of the application.,

A photocopy of the certificate of existence is not acceptable.

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 \$1150.00.

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) 487-6097.

Michael Mays
Document Specialist

Letter Number: 299A00027667

59 JUN -7 PM 12:14

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

**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. TOP STAR BUSINESS AND DEVELOPMENT 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. DOVER - DELAWARE 3. 65-085 5878
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 5-29-1998 5. 1st January To December
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. June 30-1999
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. Mme VIVIANE SEEL - 1913 South Ocean Drive
Suite 325 - HALLANDALE - FLORIDA - 33009
(Current mailing address)
8. General Purpose
(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: Mme Viviane SEEL
Office Address: 1913 South Ocean Drive suite 325
Hallandale, Florida, 33009
(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.

FILED
SECRETARY OF STATE
JUN 7 1998
TALLAHASSEE

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: Mme VIVIANE SEEL

Address: 1913 South Ocean Drive suite 325
HALLANDALE - Florida - 33009

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: SAME AS ABOVE

Address: _____

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

President: Mme VIVIANE SEEL

Address: 1913 South Ocean Drive suite 325
HALLANDALE - Florida - 33009

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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. Mme VIVIANE SEEL

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JUL - 7 PM 1:14

State of Delaware
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TOP. STAR. BUSINESS AND DEVELOPMENT INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF MAY, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TOP. STAR. BUSINESS AND DEVELOPMENT INC." WAS INCORPORATED ON THE FIRST DAY OF JUNE, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

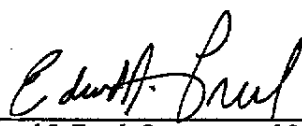
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 JUN -7 PM 12:14



2896487 8300

991176659


Edward J. Freel, Secretary of State

9724466

AUTHENTICATION:

05-05-99

DATE: