

F99000002965

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: Carl Maduri Productions, 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:

Carl Maduri  
(Name of Person)  
Carl Maduri Productions, Inc.  
(Firm/Company)  
4115 NW 5th Avenue  
(Address)  
Boca Raton, FL 33431  
(City/State/Zip)

100002847241--1  
-06/07/99--01156--001  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

FILED  
JUN -7 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Carl Maduri at (561) 338-6521  
(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

Name	OK
Availability	OK
Signature	OK
Undertaker	OK
Undertaker	OK
Knowledge	OK
P. Verifier	OK

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

**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. CARL MADURI PRODUCTIONS, 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. OHIO, USA 3. 34-1213825  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. MAY 11, 1976 5. "perpetual"  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. FUTURE BUSINESS  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 4115 NW 5th Avenue, Boca Raton, FL 33431  
(Current mailing address)

8. TO OBTAIN A CHECKING ACCOUNT LOCALLY IN FLORIDA  
(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)

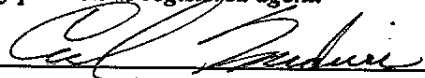
Name: CARL MADURI

Office Address: 4115 NW 5th Avenue  
BOCA RATON, FL, Florida, 33431  
(Zip code)

FILED  
69 JUN -7 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

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: CARL A. MADURI

Address: 4115 NW 5th Avenue  
Boca Raton, FL 33431

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: JOAN S. MADURI

Address: 4115 NW 5th Avenue  
Boca Raton, FL 33431

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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

President: CARL A. MADURI

Address: 4115 NW 5th Avenue  
Boca Raton, FL 33431

Vice President: JOAN S. MADURI

Address: 4115 NW 5th Avenue  
Boca Raton, FL 33431

Secretary: CARL A. MADURI

Address: 4115 NW 5th Avenue  
Boca Raton, FL 33431

Treasurer: JOAN S. MADURI

Address: 4115 NW 5th Avenue  
Boca Raton, FL 33431

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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. \_\_\_\_\_

CARL A. MADURI

JOAN S. MADURI

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

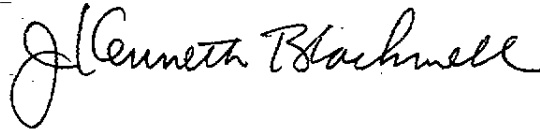
**UNITED STATES OF AMERICA**  
**STATE OF OHIO,**  
**OFFICE OF THE SECRETARY OF STATE.**



*I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show CARL MADURI PRODUCTIONS INC., an Ohio corporation, Charter No. 481356, having its principal location in Northfield, County of Summit, was incorporated on May 11, 1976 and is currently in **GOOD STANDING** upon the records of this office.*



*WITNESS my hand and official  
seal at Columbus, Ohio on  
May 17, 1999*



J. Kenneth Blackwell  
Secretary of State