F99ADDO 122KI

To: Qualification/Tax Lien Section Division of Corporations		OM PT
SUBJECT:	TABI Confortion"	99 DEI
(Name o	f corporation - must include suffix)	
Dear Sir or Madam:		FILED -3 AI ARY O
The enclosed "Application by Foreign Corp "Certificate of Existence", and check are sulto transact business in Florida.	oration for Authorization to Transact I bmitted to register the above reference	Business in Florida OF STATE State of foreign corporation A State of State
Please return all correspondence concerning	this matter to the following:	
	(Name of Person) 21	
	(Name of Person) 21	000029419429
	JABI CONFORTION	******87.50 *******7.50
	(Firms /C	
26-90 PARK RO	(Address) (City/State/Zip)	199-629
N	(Address)	Tisme ()
PEMBroke f	2009 FL. 33009	Availability Parkers
	(City/State/Zip)	
		J. J.
Should you need to call someone concerning	this matter, please call:	and Colonia
9		
JABREEL H. VSfasque par	(954) 965-2808	
(Name of Person)	(954) 965 - 2808 (Area Code & Daytime Telephone	Number)
		· — · · · · · · · · · · · · · · · · · ·
CERTAIN ADDRESS		
STREET ADDRESS:	MAILING ADDRESS:	
Qualification/Tax Lien Section	Qualification/Tax Lien Sec	ction

Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

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

3 \$87.50 Filing Fee, Certificate of Status & Certified Copy

TO: FLORIDA DEPARTMENT OF STATE

QUALIFICATION/TAX LIEN SECTION 409 E. GAINES ST.

TALLAHASSEE, FL 32399

ATTENTION: Tammi Clien/Document Specialist

RE: GABI CORPORATION Letter No. 399A00046221

Dear Mr/Ms. Cline:

In response to your letter dated October 20, 1999, enclosed please find a original Certificate of Existence from New York. Please apply the check of \$87.50 that has been retained by this office.

Thank you for the attention to this matter, please proceed to filed this corporation as soon as possible.

Sincerely,

Ğabriel Velasquez

President.

TRANSMITTAL LETTER

	cation/Tax Lien Section on of Corporations
SUBJECT:	GABI CORPORATION
<u></u>	(Name of corporation - must include suffix)
Dear Sir or Ma	dam:
"Certificate of	Application by Foreign Corporation for Authorization to Transact Business in Florida", Existence", and check are submitted to register the above referenced foreign corporation ness in Florida.
Please return a	I correspondence concerning this matter to the following:
	GABRIEL VELASQUEZ (Name of Person)
	(Name of Person)
	GABI CORPORATION
	GABI CORPORATION (Firm/Company) GABI CORPORATION (Firm/Company)
	26-90 Park Road, Bay 4
	(Address)
	Pembroke Park, Florida, 33009
	(City/State/Zip)
	to call someone concerning this matter, please call: VELASQUEZ at (954) 965-2808
	of Person) (Area Code & Daytime Telephone Number)
Qualification/T Division of Cor 409 E. Gaines S Tallahassee, FL	x Lien Section Qualification/Tax Lien Section Division of Corporations P.O. Box 6327
Enclosed is a ch	eck for the following amount:
☐ \$70.00 Filing	Fee Status Statu

FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 29, 1999

GABRIEL VELAPUZ 26-90 PARK ROAD, BAY 4 PEMBROKE PARK, FL 33009

SUBJECT: JABI CORPORATION Ref. Number: W99000017627

We have received your document for JABI CORPORATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

The document must have original signatures.

A brief description of the entity's nature of business must be included in the document.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A

ר ר ר

translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 487-6020.

Tammi Cline Document Specialist

Letter Number: 199A00038788

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.

I. GABI COL	RPORATION	1 2 3	25 25-		•			
(Name of corp	oration; must include the wor	d "INCORPORATI	ED" "COMPA	NV" "COPPC	DATIONE"	_= -		-
C. Later Cit Clerciti	sylutions of the milliolif iti 15118	wage as will clearly	/ indicate that i	it is a cornoratio	RATION OF			
natural person	or partnership if not so contain	ned in the name at	present.)	- and a strapfording	m mistead () a			
						=		
2. NEW YORK	STATE_	_	<u> </u>	4000-		<u>A</u> SE	99	
(State or count	y under the law of which it is	incorporated)	<u> 11-3</u>			22		
12/24/	00	-		(FEI number,	if applicable)	3 5	Ċ	771
4	ate of incorporation)	5P	ERPETUAL	<u>.</u>		SSR	ယ်	FILED
(Da	te of incorporation)	(Dur	tion: Year co	rp. will cease to	existor "perpetu	ar (100		
6. ''upon a	ualificātionu					" / T()	1	
(Date firs	ualification" t transacted business in Floric	la V (SEE SECTION	10 (07)		tion of the	<u> </u>		
(5)	. graisacted pastifess III LIGHE	a.) (SEE SECTION	45 607.1501, 6	07.1502 and 81	.7.155, F.S.)	증품	8	
7		L	tete.	ite		>	. •	
	· · · · · · · · · · · · · · · · · · ·	·					_	
26-90	Park Road, Bay 4,	Pembrol	ke Park,	FL 3300	9.			
	(Cun	rent mailing addres	s)				-	
8 MO	VE OF HOME ADDRES	s - Who	le Sila	00 110	reprint	_		
(Purpose)	s) of corporation authorized in	home state or cou	ntry to be core	ad out in sens	المارين المارين			
Name and str	eet address of Florida reg	gistered agent: (P.O. Box or N	Mail Drop Box	NOT acceptab	ıle i		
			-		· <u>z.o z u</u> cceptao	ic)		
Name:	GABRIEL VELASQU	EZ		_F	×.	1		
Office Address	26-90 Park Road	~	=					
Office Address:	20-30 Park Road	, Bay 4			F 2 2			
	PEMBROKE PARK			00000				
	1 411617	. I	,		_			
			(2	Zip code)				
0. Registered a	gent's acceptance:							
~	<u> </u>							
Having been name	d as registered agent and to a sereby accept the appointmen	ccept service of nu	sees for the	Bana - 4, 4 3				
			e performance	of my duties d	uuy. I juriner a and I om Comilia	gree to co	mply	
he obligations of n	y position as registered agen	1. 1 1		/	and a time juneation	wan ana	ассер	Z
	102 n	1/1/01	lus de a	//				
	T TYPOYU	1 1/101	~ 1 / Z	<u> </u>				
	(Reg	istered agent's sign	atures					

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

which it is incorporated.

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

Chairman:	GABRIEL VELASQUEZ		7880 TO			
Address:	26-90 Park Road, Bay 4					
	Pembroke Park, Florida	33009	-			
	Pembroke Park, Florida		. Pe			<u></u>
	an: GLORIA VELASQUEZ					
Address:	26-90 Park Road, Bay 4	le	-26 π	4	7 S 99	
	Pembroke Park, Florida	33009		And the second s	CRE	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
irector:					32 1	3 7
					mo B	
daress:		<u> </u>				**
		<u> </u>			- ORIGINAL ORIGINA ORI	ഗ് <u>യ</u>
irector:	<u> </u>	<u>1. 31 (52)</u>			>	
						<u></u>
. OFFICE	ERS (Street address only - P.O. Box No	OT acceptal	ble)	g e eagle Care	r - 12	<u> </u>
resident:	GABRIEL VELASOHEZ					
	26-90 Daviz Bood Box 4			· · · · · · · · · · · · · · · · · · ·		<u></u>
ddress:		the contract that	د چې		<u></u>	
	Pembroke Park, Florida	<u> </u>	<u> </u>		ta t	
ice Presiden	t: GLORIA VELASQUEZ		 		· · · ·	
	26-90 Park Road, Bay 4				<u> </u>	
	Pembroke Park, Florida	33000	- Andrews		****	
 -						
cretary:		<u> </u>	_ <u></u>	and the second s	<u> </u>	<u></u>
ldress:	1	<u> ; 12</u>	_=		 	
easurer:						
ldress:	The second secon	<u> </u>				, , , , , ; ; ; ; ; ;
		l	<u> </u>	1.	<u></u>	41
OTE: If ne	cessary, you may attach an add hdum to the	ap pliestion lis	# ing ad	ditional officers and/or directors		<u> </u>
	(19)		rang ad	ditional officers allower directors.		
	(i) 44000 1101	1 6/2				
·	(Signature of Chairman, Vice Chairman,	or any officer	listed in	n number 12 of the application)	-1-K	- : -

State of New York Department of State

I hereby certify, that the certificate of incorporation of GABI CORPORATION was filed on 12/24/1998, 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.

Witness my hand and the official seal of the Department of State at the City of Albany, this 23rd day of November one thousand nine hundred and

Secretary of State

1 1 *:

199911240131 54