## Q110000000045

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
- PICK-UP	☐ WAIT	MAIL
	siness Entity Nan	<i>,</i>
(Do	cument Number) _ Certificates	
Special Instructions to	JUN 43 P	NT,

Office Use Only

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**EXAMINER** 



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2011 JUN -2 PH 4: 95



## FLORIDA DEPARTMENT OF STATE Division of Corporations ARNEY & MORAITI

May 23, 2011

HEATHER PERRY MORAITIS, COFAR, KARNEY & MORAITIS 915 MIDDLE RIVER DRIVE - SUITE 506 FORT LAUDERDALE, FL 33304

SUBJECT: HAPARANDA CORPORATION

Ref. Number: W11000028119

We have received your document for HAPARANDA CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We can find no record of the entity named in your document. If this is the correct name, please provide us with the document number, or any other documentation supporting that this entity is registered with the Division of Corporations.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 211A00012642

## **COVER LETTER**

INHS24 (08/05)

TO: Registration Section Division of Corporations		
SUBJECT: HAPARANDA CORPO	RATION	
(1	Name of Alien Business Organization)	
Dear Sir or Madam:		
The enclosed Designation of Registere are submitted for filing.	ed Agent and Registered Office for Alien Business Organi	zation and fee(s)
Please return all correspondence conce	erning this matter to the following:	
		¥ 2
Hashan Dann		2011 JUN -2
Heather Perry (Name of Person	)	
(Name of Folson	,	2
Moraitis, Cofar, Karney & Morait	is	2 PM
(Firm/Company)		PH 4:
		<b>8</b>
915 Middle River Drive, Suite 506		
(Address)		
Fort Lauderdale, FL 33304		
(City/State and Zip Co	nde)	
(Only/Online and Elip On		
For further information concerning thi	s matter, please call:	
Heather Perry	at ( 954 ) 563-4163	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following	g amount:	
\$35.00 Filing Fee	\$43.75 Filing Fee & Certified Copy	
850-245-6051		

## DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO DESIGNATE ITS REGISTERED AGENT AND REGISTERED OFFICE IN THE STATE OF FLORIDA:

1. HAPARANDA CORPORATION	(Name of alien business	organization)			
2. PANAMA		3.			
(State or country under which entity is	s organized)	(FE	I Number, if applicable)		
. 4240 GALT OCEAN DRIVE ART	OAGE CORTIALIDED	DALE EL 3330	c		
4. 4240 GALT OCEAN DRIVE, APT. 2	(Principal office a		<u> </u>	F *.	
	<b>(</b>	<b></b> ,		300	Ē
5. Name and Florida Street address of re	egistered agent.			Cho a	2
GEORGE I	R. MORAITIS, ESQ.			HILL.	PH
915 Middle	River Drive, Suite 506			學法	÷: @
FORT LAL	JDERDALE, FL 33304				ன்
	gnature of chairman, vice cl	hairman, or officer)			_
8. Carlos Bryden, President (Name	and capacity of person sign	ing in number 7 abo	ve)		_
9. Signature of registered agent:	, , , , , , , , , , , , , , , , , , ,	<b></b>	•		
I hereby accept the appointment as re 607.0505, Florida Statutes.	gistered agent. I am	familiar with an	d accept the obliga	itions o	f section
	•		1. /2/1	, ,	
(Registered agent accepting appoint	nent)		(Date)		_
	7		()		
THE BILING OF THIS ATTEN	DISTRICT ODCA	NITY ATTION TO	ODM WITH TE	7 TO 101	ODIDA

FILING FEE \$35

DEPARTMENT OF STATE DOES NOT AUTHORIZE THE ABOVE REFERENCED ENTITY TO

TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Make checks payable to Florida Department of State and mail to: Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

INHS24 (08/05)