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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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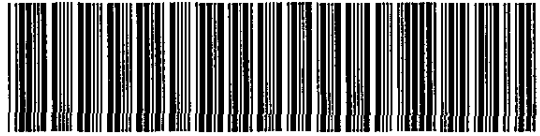
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

August 2, 2005

MORRIS LUBETSKY  
6427 POINTE PLEASANT CIRCLE  
DELRAY BEACH, FL 33484

SUBJECT: ALLTRADES INC.  
Ref. Number: W05000036363

We have received your document for ALLTRADES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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) 245-6020.

Tammi Cline  
Document Specialist

Letter Number: 005A00049759

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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ALLTRADES 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:

MORRIS LUBETSKY

(Name of Person)

ALLTRADES INC

(Firm/Company)

6427 POINTE PLEASANT CIRCLE

(Address)

DELRAY BEACH, FLORIDA 33484

(City/State and Zip code)

For further information concerning this matter, please call:

FRANCINE J. PERELSTINE at (561) 488-1643

(Name of Person)

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

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

**MAILING ADDRESS:**

Registration 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

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. ALL TRADES INC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

AAA SHUTTERS AND KITCHENS, INC. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

ALLEGANY COUNTY, PENNSYLVANIA JUNE 6, 1983 (State or country under the law of which it is incorporated) (FEI number, if applicable)

JUNE 6, 1983 N/A perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

NONE (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502 P.S. to determine penalty liability)

6427 POINTE PLEASANT CIRCLE DEL RAY BEACH, FL. 33484 (Principal office address) (Current mailing address)

SAME AS ABOVE RESIDENTIAL CONTRACTOR (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 NOT acceptable)

Name: STEVEN W. LUBETSKY, ESQUIRE

Office Address: 10280 CAMELBACK LANE BOCA RATON, FL, Florida 33498 (City) (Zip code)

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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.

Steven W. Lubetsky, Esquire (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 business addresses of officers and/or directors:

A. DIRECTORS

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

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

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

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

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

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

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

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

B. OFFICERS

President: MORRIS LUBETSKY

Address: 6427 Pointe PLEASANT CIRCLE

DELRAY BEACH, FLORIDA 33484

Vice President: \_\_\_\_\_

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

Secretary: MORRIS LUBETSKY

Address: 6427 Pointe PLEASANT CIRCLE

Treasurer: \_\_\_\_\_

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

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. *Morris Lubetsky*

(Signature of Director or Officer listed in number 12 of the application)

14. MORRIS LUBETSKY, PRESIDENT

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

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE

July 21, 2005

TO ALL WHOM THESE PRESENTS SHALL COME , GREETING :

I DO HEREBY CERTIFY THAT,

**ALLTRADES, INC.**

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains subsisting 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.

*Debra A. Conte's*

Secretary of the Commonwealth