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03 FEB -6

STATE
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

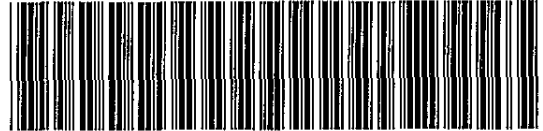
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE
CORPORATIONS
TALLAHASSEE, FLORIDA

AL

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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TALLAHASSEE STATE
TALLAHASSEE, FLORIDA

Semy - Lin Corporation

- Art of Inc. File _____
- LTD Partnership File _____
- Foreign Corp. File _____
- L.C. File _____
- Fictitious Name File _____
- Trade/Service Mark _____
- Merger File _____
- Art. of Amend. File _____
- RA Resignation _____
- Dissolution / Withdrawal _____
- Annual Report / Reinstatement _____
- Cert. Copy _____
- Photo Copy _____
- Certificate of Good Standing _____
- Certificate of Status _____
- Certificate of Fictitious Name _____
- Corp Record Search _____
- Officer Search _____
- Fictitious Search _____
- Fictitious Owner Search _____
- Vehicle Search _____
- Driving Record _____
- UCC 1 or 3 File _____
- UCC 11 Search _____
- UCC 11 Retrieval _____
- Courier _____

Signature _____

Requested by: _____

Name

2/16/03

Date

10:50

Time

Walk-In _____

Will Pick Up _____

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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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. FEB -6 PM 1:

STATE OF FLORIDA
TALLAHASSEE, FLO

1. JERRY-LIN CORPORATION

(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. BRONX, NEW YORK

(State or country under the law of which it is incorporated)

3. 13-2707707

(FEI number, if applicable)

4. 2/1/71

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 840 DEAN AVENUE, BRONX, NY 10465

(Principal office address)

840 DEAN AVENUE, BRONX, NY 10465

(Current mailing address)

8. OWN, OPERATE, LEASE COMMERCIAL PROPERTY

(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: CARLOS J. BERROCAL

Office Address: 801 MAPLEWOOD DRIVE, #22A

JUPITER

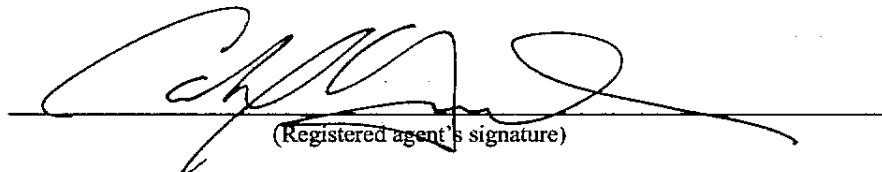
(City)

, Florida 33458

(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.

12. Names and business addresses of officers and/or directors:

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FALL WASH STATE, FLORIDA

A. DIRECTORS

Chairman: GERALD VOGT

Address: 4 HOLLY KNOLL
ARMONK, NY 10504

Vice Chairman: _____

Address: _____

Director: LINDA VOGT

Address: 4 HOLLY KNOLL
ARMONK, NY 10504

Director: GERALD VOGT

Address: 4 HOLLY KNOLL
ARMONK, NY 10504

B. OFFICERS

President: GERALD VOGT

Address: 4 HOLLY KNOLL
ARMONK, NY 10504

Vice President: LINDA VOGT

Address: 4 HOLLY KNOLL
ARMONK, NY 10504

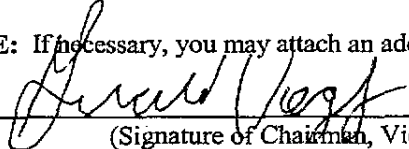
Secretary: LINDA VOGT

Address: 4 HOLLY KNOLL, ARMONK, NY 10504

Treasurer: LINDA VOGT

Address: 4 HOLLY KNOLL, ARMONK, NY 10504

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. CHAIRMAN/PRESIDENT
(Typed or printed name and capacity of person signing application)

State of New York } ss:
Department of State

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I hereby certify, that the Certificate of Incorporation of JERRY-LIN CORPORATION was filed on 02/01/1971, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with 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 28th day of January two thousand and three.



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