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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAUGILE PALEVSKY MANAGEMENT CORP.
(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:

FRITZ G. MAUGILE

(Name of Person)

500004927865--3
-02/14/02-01882-002
*****78.75 *****78.75

MAUGILE PALEVSKY MANAGEMENT CORP.

(Firm/Company)

8171 LAKE SERENE DRIVE

(Address)

ORLANDO, FLORIDA 32836

(City/State and Zip code)

For further information concerning this matter, please call:

FRITZ G. MAUGILE

(Name of Person)

at (877) 760-4998

(Area Code & Daytime Telephone Number)

e-mail = fmaugile@yahoo.com

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

02 FEB 14 PM 10:38
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

mtm
2/18

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. MAUGILE PALEVSKY MANAGEMENT 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. DELAWARE 3. EMPLOYER IDENTIFICATION # 03-0365248
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. NOVEMBER 22, 1999 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. JANUARY 3, 2002
(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. 8171 LAKE SERENE DRIVE, ORLANDO, FL, USA 32836
(Principal office address)

8171 LAKE SERENE DRIVE, ORLANDO, FL, U.S.A, 32836
(Current mailing address)

8. Artist/tour management and any other lawful purpose.
(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: CT CORPORATION

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (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.

Handwritten signature of Robin LaPeters

(Registered agent's signature)

Robin LaPeters
Vice President

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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: FRITZ G. MAUGILE

Address: 8171 LAKE SERENE DRIVE

ORLANDO, FL 32836

Director: JONATHAN PALEVSKY

Address: 3471 CHAPLEAU

MONTREAL, QUEBEC, CANADA H2K-3H7

B. OFFICERS

President: FRITZ G. MAUGILE

Address: 8171 LAKE SERENE DRIVE

ORLANDO, FL 32836

Vice President: JONATHAN PALEVSKY

Address: 3471 CHAPLEAU

MONTREAL, QUEBEC, CANADA H2K-3H7

Secretary: JONATHAN PALEVSKY

Address: MONTREAL, QUEBEC

Treasurer: _____

Address: _____

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02 FEB 14 PM 3:31
SECRETARY OF STATE
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

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

13. *Fritz Maugile*

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. FRITZ G. MAUGILE, PRESIDENT

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

Delaware

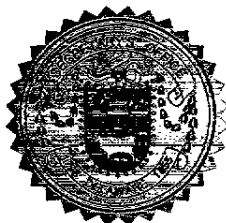
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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MAUGILE PALEVSKY MANAGEMENT CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF FEBRUARY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

FILED
02 FEB 14 PM 10:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1592132

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DATE: 02-01-02