

CT CORPORATION SYSTEM

F020000004734

CORPORATION(S) NAME

(15) 9/17 FOR CORP

Beta Reo Corp.

200007802942--6  
-09/17/02--01051--024  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

- Profit
- Nonprofit
- Foreign
- Limited Partnership
- LLC
- Certified Copy
- Call When Ready
- Walk In
- Mail Out
- Amendment
- Dissolution/Withdrawal
- Reinstatement
- Annual Report
- Name Registration
- Fictitious Name
- Photocopies
- Call If Problem
- Will Wait
- Merger
- Mark
- Other
- Change of RA
- UCC
- CUS
- After 4:30
- Pick Up

Name \_\_\_\_\_  
 Availability \_\_\_\_\_  
 Document \_\_\_\_\_  
 Examiner \_\_\_\_\_  
 Updater \_\_\_\_\_  
 Verifier \_\_\_\_\_  
 W.P. Verifier \_\_\_\_\_

9/17/02

AAM

Order#: 5594919

Ref#: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

STATE OF FLORIDA  
TALLAHASSEE

02 SEP 17 PM 1:55

FILED

02 SEP 17 AM 11:13

RECEIVED

660 East Jefferson Street  
 Tallahassee, FL 32301  
 Tel. 850 222 1092  
 Fax 850 222 7615

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. Beta Reo Corp. (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. New York (State or country under the law of which it is incorporated) 3. 11-3218525 (FEI number, if applicable)

4. June 6, 1994 (Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. C/O GreenPoint Bank 90 Park Avenue, New York, NY 10016 (Current mailing address)

8. Any lawful act or activity, including holding title to real estate. (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: C T Corporation System Office Address: 1200 South Pine Island Road Plantation, Florida, 33324 (Zip code)

02 SEP 17 PM 1:56 FILED SECRETARY OF STATE TALLAHASSEE FLORIDA

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. C T Corporation System

(Registered agent's signature) Jonathan B. Giddings Assistant Secretary

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 addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable) FL019 - 9/2/99 CT System Online

See Attached List

**A. DIRECTORS (Street address only - P.O. Box NOT acceptable)**

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

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

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

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

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

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

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

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

**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**

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

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

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

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

Secretary: \_\_\_\_\_

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

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

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

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

13. \_\_\_\_\_

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

14. \_\_\_\_\_ Robert Tramantano - Secretary

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

Title	Name	Business Address	Residence Address
President	Lynne Panellino	1981 Marcus Avenue Lake Success, NY 11042	Same
Vice President	Joseph Perillo	90 Park Avenue New York, NY 10016	Same
Vice President	Dennis Tussey	2300 Brookstone Centre Parkway Columbus, BA 31909	Same
Vice President	Frank Volpe	1981 Marcus Avenue Lake Success, NY 11042	Same
Vice President	Greg Hrycak	1981 Marcus Avenue Lake Success, NY 11042	Same
Treasurer	Angela Giaramida	90 Park Avenue New York, NY 10016	Same
Secretary	Robert Tramantano	90 Park Avenue New York, NY 10016	Same
Directors	Joseph Perillo	90 Park Avenue New York, NY 10016	Same
	Lynne Panellino	1981 Marcus Avenue Lake Success, NY 11042	Same
	Dennis Tussey	2300 Brookstone Centre Parkway Columbus, GA 31909	Same

**State of New York } ss:  
Department of State**

*I hereby certify, that the Certificate of Incorporation of BETA REO CORP. was filed on 06/06/1994, 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.*

*The Biennial Statement is past due.*



\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 16th day of September  
two thousand and two.*

A handwritten signature in black ink, appearing to read "Roy A. DeS...".

*Secretary of State*