

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: S.C.A. Northeast 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:

Donna Holman
(Name of Person)

(Firm/Company)

1000 NW 14th St
(Address)

Miami FL 33136
(City/State and Zip code)

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 FILED
 TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Donna Holman at (305) 381-7043
(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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 8, 2003

DONNA HOLMAN
1000 NW 14TH ST
MIAMI, FL 33136

SUBJECT: S.C.A. NORTHEAST INC.
Ref. Number: W03000022498

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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We have received your document for S.C.A. NORTHEAST INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 703A00045458

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. S.C.A. Northeast Inc
(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 (State or country under the law of which it is incorporated)
3. 20-0127146 (FEI number, if applicable)

4. 7/30/03 (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. 1000 NW 14th St Miami FL 33136
(Principal office address)

1000 NW 14th St Miami FL 33136
(Current mailing address)

8. All lawful activity.
(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: Donna Holman
Office Address: 1000 NW 14th St
Miami FL 33136, Florida 33136
(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.

Donna Wells
(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.

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: RUSSELL M FAIBISCH

Address: 1000 NW 14th ST
MIAMI FL 33136

Vice Chairman: CHARLES FAIBISCH

Address: 1000 NW 14th ST
MIAMI FL 33136

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: CHARLES FAIBISCH

Address: 1000 NW 14th ST
MIAMI FL 33136

Vice President: RUSSELL M FAIBISCH

Address: 1000 NW 14th ST
MIAMI FL 33136

Secretary: CHARLES FAIBISCH

Address: 1000 NW 14th ST MIAMI FL 33136

Treasurer: DONNA HOLMAN

Address: 1000 NW 14th ST MIAMI FL 33136

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

13. Donna Holman

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

14. Donna Holman

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

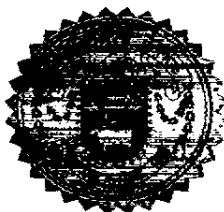
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Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "S.C.A. NORTHEAST INC." 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 THIRTEENTH DAY OF AUGUST, A.D. 2003.



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Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2580354

DATE: 08-13-03