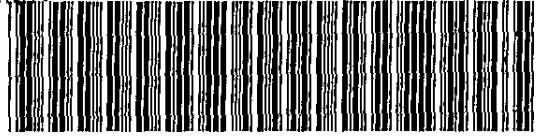


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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Defined Contribution Plans, 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:

RANDY H. MYSEL  
(Name of Person)

DEFINED CONTRIBUTION PLANS, INC.  
(Firm/Company)

5702 LAKE WORTH ROAD, SUITE 4  
(Address)

LAKE WORTH, FLORIDA 33463  
(City/State and Zip code)

For further information concerning this matter, please call:

RANDY MYSEL  
(Name of Person)

at ( 561 ) 439-5252 x 2222  
(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

FILED

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.

2004 OCT 11 P 12:41  
THE CLERK OF STATE  
TALLAHASSEE, FLORIDA

1. Defined Contribution Plans, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 42-1641656  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. July 12, 2004 5. "Perpetual"  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon filing.  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5702 Lake Worth Road, Suite 4, Lake Worth, Florida 33463  
(Principal office address)

P.O. Box 1833, Jupiter, Florida 33468-1833  
(Current mailing address)

8. Provide Market Research to Defined Contribution Vendors.  
(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: ANGELL CORPORATE SERVICES, INC.

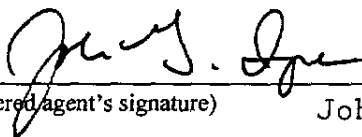
c/o Edwards & Angell, LLP

Office Address: One North Clematis Street, Suite 400

West Palm Beach, Florida 33401  
(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.*



(Registered agent's signature)

John G. Igoe, 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.

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

**A. DIRECTORS**

**FILED**

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

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

2004 OCT 11 P 12:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

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

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

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

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

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

**B. OFFICERS**

President: Warren J. Cormier

Address: 5702 Lake Worth Road, Suite 4

Lake Worth, Florida 33463

<sup>CEO</sup>  
Vice President: Randy H. Myzel

Address: 5702 Lake Worth Road, Suite 4

Lake Worth, Florida 33463

Secretary: Laurie A. Ortiz

Address: 5702 Lake Worth Road, Suite 4, Lake Worth, Florida 33463

Treasurer: Laurie A. Ortiz

Address: "same as above"

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

13. 

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

14. RANDY H. MYSEL Chief Executive Officer

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

# Delaware

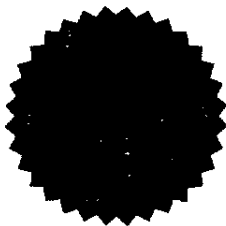
PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DEFINED CONTRIBUTION PLANS, 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 EIGHTEENTH DAY OF AUGUST, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DEFINED CONTRIBUTION PLANS, INC." WAS INCORPORATED ON THE TWELFTH DAY OF JULY, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

3827815 8300

AUTHENTICATION: 3303055

040605307

DATE: 08-18-04