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(Reque	estor's Name)	-	
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PICK-UP	WAIT	MAIL	
(Busine	ess Entity Name)		
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Certified Copies	Certificates of	Status	
Special Instructions to Fili	ng Officer:		
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· TRANSMITTAL LETTER

	tration Section ion of Corporations					
	·					
SUBJECT: PANCOAST TRADING, INC. (Name of corporation - must include suffix)						
Door Sir or M						
Dear Sir or M	adam:					
	"Application by Foreign Corporation for Authorization to Transact Business in F f Existence," and check are submitted to register the above referenced foreign cor ess in Florida.		ı to			
Please return	all correspondence concerning this matter to the following:					
	ERIC PAPUNEN					
	(Name of Person)					
	PANCOAST TRADING, INC.					
	(Firm/Company)	2.0 3.0)5 St			
	2505 S.W. 31 AVENUE		SEP			
	(Address)	- 11±3. - 11±4.	5			
	PEMBROKE PINES, FL 33009	\mathcal{C}	<u> </u>			
	(City/State and Zip code)	STAT JANS	PM 2: 59			
For further in	formation concerning this matter, please call:	Σm	9			
CATHE	ERINE URBINA at (954) 963 - 3669					
(Nam	ne of Person) (Area Code & Daytime Telephone Number)					
Regis Divis 409 E	EET ADDRESS: tration Section ion of Corporations C. Gaines St. nassee, 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 Fili	ing Fee	te of Sta				

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.	PANCOAST I	RADING, INC.			
		corporation; must include "INCORPORATE Corp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATION,"		_
	(If name unavail	able in Florida, enter alternate corporate nar	ne adopted for the purpose of transacting busi	ness in Flori	da)
2.	DELAWARE		3. 20-0141526		
	(State or country	under the law of which it is incorporated)	(FEI number, if applicable	:)	
4.	AUGUST 4, 20	003	5. PERPETUAL		<u>_</u>
	(Date	e of incorporation)	(Duration: Year corp. will cease to exist	ог "perpetual	l")
6.					
			is in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)		
_	2505 Q W/ 31 A	VENUE, PEMBROKE PARK, FL 33009			
7.	2000 3.11. 01 2	(Principal office a			_
	P O BOX 2212	27, FT. LAUDERDALE, FL 33335	•	Æg E)5 S
	1.0. BOX 2212	(Current mailing a	address)		5
					5 7
8.	ANY LAWFUL			<u> </u>	
	(Purpose(s	s) of corporation authorized in home state or	country to be carried out in state of Florida)	STATE	<u>.</u> ب
9.	Name and street	et address of Florida registered agent: (I	P.O. Box NOT acceptable)	が出る。	ם מ
	Name:	ANTHONY S. ADELSON, P.A.			
0	ffice Address:	2100 E. HALLANDALE BCH. BLVD.,	STE 400		
		HALLANDALE	, Florida 33009		
		(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)

- 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	
Chairman:	
Address:	, ,
/ice Chairman:	
Address:	
Director:	-
Address:	***
reducess.	
Director:	
Address:	
3. OFFICERS	05 SEP SECI
President: ERIC PAPUNEN	SEP
Address: 2505 S.W. 31 AVENUE	
PEMBROKE PINES, FL 33009	
/ice President:	2: 5:9 PADA
Address:	9
ecretary: ERIC PAPUNEN	·
Address: 2505 S.W. 31 AVENUE, PEMBROKE PINES, FL 33009	
reasurer:	_
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers a	nd/or directors.
3. (Single SD) Annual Control of the conflication	
(Signature of Director or Officer listed in number 12 of the application)	
4. President	

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

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PANCOAST TRADING, 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 EIGHTH DAY OF JULY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PANCOAST TRADING, INC." WAS INCORPORATED ON THE FOURTH DAY OF AUGUST, A.D. 2003.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

Warriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4008389

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DATE: 07-08-05