F96000001384

TO: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: PYRAMID MACHINE TOOL CO., 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:

PYRAMID MACHINE TOOL CO., INC.

(Firm/Company)

1224 BARMERE LN

(Address)

BRANDON, FL 3351/

(City/State/Zip)

Should you need to call someone concerning this matter, please call:

LANCE LATUSZEK at (813) 689-2537 (Name of Person) (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607. I SO3, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. PYRAMID MACHINE TOOL CO., INC		
1. FVRAMID MACHINE TOOL CO., INC. (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" of 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.)	r words	or
2. INDITANA (State or country under the law of which it is incorporated) 3. 35-1785373 (FEI number, if applicable)) 2 2)	
4. OCTOBER 25, 1989 5. W/A (Date of Incorporation) (Duration: Year corp. will cease to exist or	*perpel	ual*)
6. MARCH 16, 1946 (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)	- 95	O SE
7. 1224 BARMERE LN.	HAR 19	
BRANDON, FL 3351) (Current mailing address)	P# 12:	7000 1000 1000 1000 1000 1000 1000 1000
8. MACHINE TOOL SALES + SERVICE. (Purpose(s) of corporation authorized in home state or country to be carried out in the state of	: 22	ATE
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box	NOT	
acceptable)	NOI	
Name: LANCE LATUSZEK		
Office Address: 1224 BARMERE LN		
BRANDON, Florida, 3351)		
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 a registered agent and agree to act in this capacity. I further agree to comply with the provall statutes relative to the proper and complete performance of my duties, and I am familia and accept the obligations of my position as registered agent.	ted s isions ar with	of h

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.

(Registered agent's signature)

12. Names and addresses of officers and/or directors: (Street address ONLY-P. O. Box 'NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) MARY Y. LATUSZEK BRANDON, FL Vice Chairman: LANCE Address: 1224 BARMERE LN BRANDON FC Director: _____ Address: ____ Director: ___ Address: _____ ٥ B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: __ LANCE Address: ___1 2 2 リ BARMERE BRANDON Vice President: _____MAR\ Address: ____ Secretary: ___ Address: LANCE Treasurer: _ Address: __ 1224 BARMENE LL) BRANDON. NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. LANCE LATUSZEK PRESIDENT
(Typed or printed name and capacity of person signing application)

STATE OF INDIANA

OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

PYRAMID MACHINE TOOL CO., INC.

filed Articles of Incorporation on October 25, 1989, and in a corporation duly organized and existing under and by virtue of the laws of the State of Indiana.

I further certify this corporation has filed its most recent annual report required by Indiana law with the Secretary of State, or is not yet required to file such annual reports, and that Articles of Dissolution have not been filed.

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In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Eleventh day of March, 1996.

Sue anne Silvay Secretary of State

Deputy