## F0000000a883

## TRANSMITTAL LETTER

|   | ation Section<br>n of Corporations |   |   |  |  |  |
|---|------------------------------------|---|---|--|--|--|
| SUBJECT:  | MDT PRODUCTI                       | ONS INC   |   |  |  |  |
|   | (Name of c                         | corporation - must include suffix)  |   |  |  |  |
| Dear Sir or Mad                                     |                                    | must motute sumx)   |   |  |  |  |
| The enclosed "A "Certificate of E transact business | , and oncor me small               | ation for Authorization to Transac<br>itted to register the above reference | t Business in Florida",<br>ced foreign corporation to |  |  |  |
| Please return all                                   | correspondence concerning thi      | is matter to the following:   |   |  |  |  |
| _   | Arthur Uscher                      |   |   |  |  |  |
| _   |                                    | Name of Person)<br>scher & Russo  |   |  |  |  |
|   | (I                                 | Firm/Company)   | <del></del>   |  |  |  |
| _   | 401 Hackensack Av                  |   |   |  |  |  |
| _   |                                    | (Address)   |   |  |  |  |
|   | Hackensack, New J                  |   |   |  |  |  |
| _   | ((                                 | City/State/Zip)   |   |  |  |  |
| Should you need                                     | to call someone concerning this    | . 300   | ******87.50 ******87.50                               |  |  |  |
| _Arthur Uso   | ther at (                          | _201 ) 342 7100   |   |  |  |  |
| (Name of  |                                    | (Area Code & Daytime Telepho  | ne Number   |  |  |  |
| ,   |                                    | - wy mine i eropito.  | ŕ   |  |  |  |
| Name<br>Availabilis <b>TREET ADDRI</b>              | ess:                               | MAILING ADDRESS:  | OO MAY<br>SECRET                                      |  |  |  |
| DocumerRegistration Section                         | n<br>n                             | Registration Section  | FIL<br>SSS  |  |  |  |
| Examine Division of Corpor                          | ations                             | Division of Corporations  | \$2.5 Trans   |  |  |  |
| 409 E. Gaines St.<br>Update: Tallahassee, FL 32     | 200                                | P.O. Box 6327   | ~ ~ <del>~</del> ~ <del>~</del> ~                     |  |  |  |
| Lindatez  | for the following amount:          | Tallahassee, FL 32314   | AMII: 08 OF STATE E. FLORIDA                          |  |  |  |
| Acknowledg \$70000 Filing F                         |                                    | 578.75 Filing Fee & X   | \$87.50 Filing Fee,                                   |  |  |  |
| W. P. Verifyer DCC                                  | Solution of Status                 | catus Certified Copy Certificate of Status & Certified Copy                 |   |  |  |  |

## 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. | (Name of corpo     | roductions, Inc.  | ord "INCORPO                          |             |             |                        |                 |                 |       |
|----|--------------------|---|---------------------------------------|-------------|-------------|------------------------|-----------------|-----------------|-------|
|    |                    | viations of like import in lar<br>or partnership if not so cont |                                       |             |             | it is a corporation in | nstead of a     |                 |       |
| 2. | New Jers           |   | . ,                                   |             | 22 36       | 15226                  | -               |                 |       |
|    | (State or country  | y under the law of which it                                     | is incorporated                       | 1)          |             | (FEI number, if a      | pplicable)      |                 |       |
| 4. | _10/23/98          | 3   | 5.                                    | Perpet      | ual         |                        |                 |                 |       |
|    | (Da                | te of incorporation)  |                                       | (Duration   | : Year c    | orp. will cease to ex  | ist or "perpetu | al")            |       |
| 6. | 1/13/00            | <b></b>   |                                       | =           |             | •                      |                 |                 |       |
|    | (Date first transa | acted business in Florida. It<br>(SEE SE                        | f corporation h<br>CTIONS 607.        |             |             |                        | ert "upon quali | fication.       | "     |
| 7. | a. 401 Had         | ckensack Avenue,  |                                       |             | <u> 076</u> | 01                     |                 |                 |       |
|    |                    | (I)   | Principal office                      | address)    |             |                        |                 |                 |       |
|    | b. <u>same</u>     |   |                                       | .—          |             |                        |                 |                 |       |
|    |                    |   | Current mailing                       | g address)  |             |                        |                 | 8               |       |
|    |                    |   | •                                     |             |             |                        | A.A.            | MAY 15 AMII: 08 |       |
| 8. | Any lawfi          | ıl business perm  | itted to                              | a corr      | orati       | on ·                   | AS              | -               | 1     |
|    | (Purpose(          | (s) of corporation authorized                                   | d in home state                       | or country  | to be car.  | ried out in state of F | Florida)        | , w.            | FILEU |
| 9. | Name and str       | eet address of Florida re                                       | egistered age                         | nt: (P.O. ) | Box or M    | Iail Drop Box NO       | T accentable)   |                 | ب     |
|    |                    |   |                                       |             |             | <u></u>                | 93              | 1.0             |       |
|    | Name:              | Mitchell Usche  | r                                     |             |             |                        | D.<br>A         | (C)             |       |
| Of | ffice Address:     | 520 NE 20th St  | ., Suite                              | 1008        |             |                        |                 |                 |       |
|    | _                  | Ft. Lauderdale  |                                       |             | Florida     | 33305                  |                 |                 |       |
|    | ·                  |   | · · · · · · · · · · · · · · · · · · · |             |             | (Zip code)             |                 |                 |       |
| 10 | . Registered a     | gent's acceptance:  |                                       |             |             |                        |                 |                 |       |

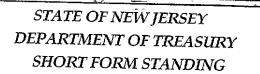
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative 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)
MITCHELL USCHER

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 busi | iness addresses of officers and/or directors:   |              |            |         |
|--------------------|---|--------------|------------|---------|
| A. DIRECTORS       | · · · · · · · · · · · · · · · · · · ·   |              |            |         |
| Chairman:          | Arthur Uscher   |              | <u> </u>   |         |
| Address:           | 401 Hackensack Avenue   | <u></u>      |            |         |
|                    | Hackensack, NJ 07601  |              |            |         |
| Vice Chairman:     | Mitchell Uscher   |              |            |         |
|                    | 520 NE 20th St., Suite 1008   |              |            |         |
|                    | Ft. Lauderdale, FL 33305  |              |            |         |
| Director:          |   |              |            |         |
| 4                  |   |              |            | · · · · |
|                    |   | <u> </u>     |            |         |
| Director:          |   | <del>-</del> |            |         |
|                    |   |              |            | -       |
|                    |   |              |            |         |
| B. OFFICERS        |   |              |            |         |
| President:         | Arthur Uscher   | SEC          | 8          |         |
| Address:           | 401 Hackensack Avenue   | <u> </u>     | THY .      | n       |
|                    | Hackensack, NJ 07601  | RY O         | ப <u>ு</u> | 5       |
| Vice President:    | Mitchell Uscher   | FLO          |            |         |
| Address:           | 520 NE 20th St., Suite 1008   | REF.         | 08         |         |
|                    | Ft. Lauderdale, FL 33305  |              |            |         |
| Secretary:         | Florence Uscher   |              |            |         |
| Address:           | 435 Summit Avenue   |              | -          |         |
|                    | Hackensack, NJ 07601  |              |            |         |
| Treasurer:         | Florence Uscher   |              |            |         |
| Address:           | 435 Summit Avenue   |              |            |         |
| <del></del>        | Hackensack, NJ 07601  |              |            |         |
| NOTE: If necessary | you may attach an addendum to the application listing additional officers and/or direct | ors.         |            |         |
| 13/                |   |              |            |         |
| (Sign              | ature of Chairman, Vice Chairman, or any officer listed in number 12 of the application | 1)           |            |         |

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



MDT PRODUCTIONS, INC.

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on October 23, 1998.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Arthur Uscher Esq 401 Hackensack Ave 6th Floor Hackensack, NJ 07601

Continued on next page . . .

SECRETARY OF STATE TALLAHASSEE, FLORIDA

