

F00000004601

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Inner City Entrepreneurs, 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:

Lee Moore
(Name of Person)
Inner City Entrepreneurs, Inc.
(Firm/Company)
2820 S. E. 5th Place
(Address)
Homestead, FL 33033
(City/State/Zip)

400003350894-2-
-08/09/00-01065-011
*****70.00 *****70.00

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

Lee Moore at 305-230-5573
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
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

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TALLAHASSEE, FLORIDA

Name
Enclosed is a check for the following amount:
Availability

<input checked="" type="checkbox"/> \$70.00 Filing Fee Examiner DCC	<input type="checkbox"/> \$78.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certificate of Status & Certified Copy
Updater DCC			
Multiplier Verifier DCC			
Acknowledgement DCC			
P. Verifier DCC			

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**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. Inner City Entrepreneurs. 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. Nevada
(State or country under the law of which it is incorporated)
3. 59-3362810
(FEI number, if applicable)
4. March 25, 1997
(Date of incorporation)
5. perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. September 1, 2000 (anticipated)
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 2820 S. E. 5th Place, Homestead, FL 33033

(Current mailing address)
8. For profit sale of apparel and music merchandise
(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: Lee Moore
Office Address: 2820 S. E. 5th Place
Homestead, Florida, 33033
(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.

Lee Moore
(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 addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

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A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: Lee Moore

Address: 2820 S. E. 5th Place
Homestead, FL 33033

Vice Chairman: Sandra Moore

Address: 2820 S. E. 5th Place
Homestead, FL 33033

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Lee Moore

Address: 2820 S. E. 5th Place
Homestead, FL 33033

Vice President: Sandra Moore, Executive Vice President

Address: 2820 S. E. 5th Place
Homestead, FL 33033

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

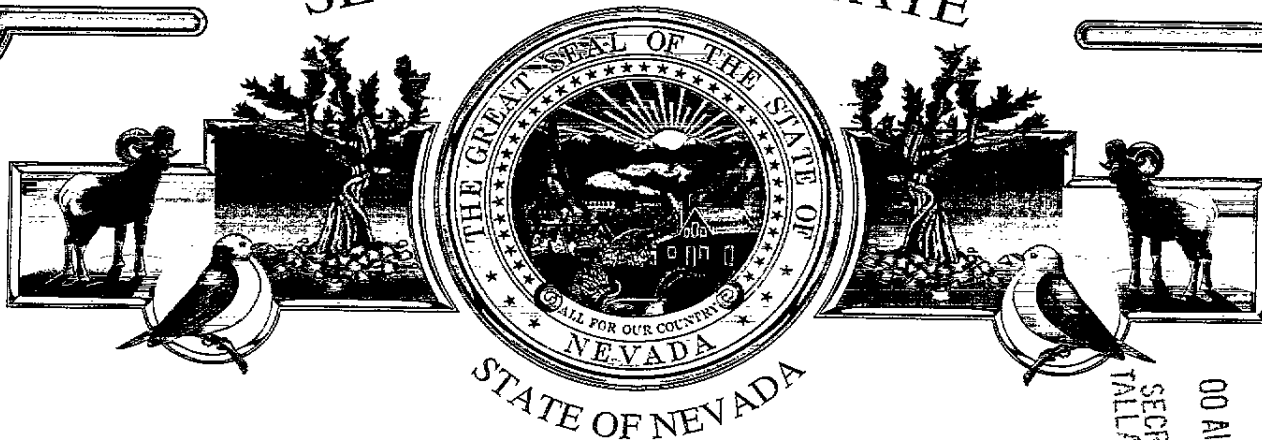
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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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

14. Lee Moore, President
(Typed or printed name and capacity of person signing application)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **INNER CITY ENTREPRENEURS, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since March 25, 1997, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on June 12, 2000.



Dean Heller

Secretary of State

By

Joann Carson

Certification Clerk