F00000004179

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section Division of Corporations		
SUBJECT: Market Pro Computer		
(Name of corporatio	n - must include suffix)	· -
Dear Sir or Madam:	901	~ -708/25/0001097 0 0
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to r to transact business in Florida.	Authorization to Transact Bregister the above referenced	******78。75 *****78 usiness in Florida", foreign corporation
Please return all correspondence concerning this matter	Coark	
Marketpro Comp	uter Shows,	lnc.
5870 Hubbard	npany) Drive	
Rockville, MD (Addr	20052	
(City/Stat	e/Zip)	<u> </u>
Should you need to call someone concerning this matter Roark (Name of Person) (Area Concerning this matter (Area Concerning this matter)	, please call:	IALIS OS X 119 GAR AL
(Name of Person) (Area C	ode & Daytime Telephone I	所 () ()
STREET ADDRESS:	MAILING ADDRESS:	.D PN 10: 5 FSTATE FLORID
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Qualification/Tax Lien Sec Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	· · · · · · · · · · · · · · · · · · ·
Enclosed is a check for the following amount:		4nh 8/30
□ \$70.00 Filing Fee \$\frac{1}{2}\$\$ \$78.75 Filing Fee & □ Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

301-384-8323

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.
. Marketfro Computer snows, 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 prosent.)
2 Mary land 3 52 1886526 (State or county under the law of which it is incorporated) (State or county under the law of which it is incorporated) (State or county under the law of which it is incorporated)
1 8/25/94 s. Perpetval
(Date of incorporation) (Duration: Year-corp. will consequence exist or "perpetual") 6. Upon Qualifications (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, P.S.) 7. Market from Computer Snows, Inc.
5070 Hubbard Drive, Pockville MD 20852
(Current mailing address)
8 Promote and conduct Computer track shows and sales. (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: LINDA STONEBRIDGE
Office Address: 3 COLLINGVILLE (1)
PALM COAST, Florida, 32137 ART ASSET TO SEE
1 7 5
Having been named as registered agent and to accept vervice of process for the above stated corporation at the place designed 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 addresses of officers und/or directors: (Street address ONLY - P.O. Box NOT acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	
Chairman:	
Address:	
Vice Chairman:	
Address:	
19/F	
Director:	
Address:	
<u> </u>	
Director:	445
Address:	
3. OFFICERS (Street address only - P.O. Box NOT accepta	NIA)
President: <u>Eane He</u> Winton	inte)
-00// 0 - 1 0	3 to 1 to 1 to 2 to 2 to 2 to 2 to 2 to 2
Address: 7004 Armat Drive	-t C
Bethesda, MO 20817	SECI
Vice President: Robert Martin	
Address: 3890 Robar Street	25 SSE
Las Vegas, NV 89121	FF PE
Secretary:	ORI
Address:	57 5A
reacurer	
reasurer:	TO THE STATE OF TH
ddress:	
	<u> </u>
NOTE: If necessary, you may attach an addendum to the application I	_ / / .
3. (Signature of Chairman, Vice Chairman, or any office	S/8/00 Disted in number 12 of the application)
4. Jeanette Winton, Presiclent	
(Typed or printed name and capacit	

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT MARKETPRO COMPUTER SHOWS, INC. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS AUGUST 11, 2000.

Paul B. Anderson Charter Division O AUG 25 PH 10: 57

