F01000001699

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
	ystens, Inc		
(Name of corporat	ion - must include suffix)		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to transact business in Florida.			1
Please return all correspondence concerning this matt	er to the following:	SE OI	
Sandra Chassi		58	
(Name o	of Person)	MR 2	<u> </u>
Donoven Data S		<u> </u>	1
(Firm/C	ompany)	======================================	
115 west 10th str	eet	83 R	
	iress)	DA	1,00
New york, My	10011		- MICh
(City/State	and Zip code)		3/2
For further information concerning this matter, please		10039107 -03/26/0101 ******70.00	'28 151010 *****70.0
Frances Manon: at (2)2) 633-8100		į.
	Code & Daytime Telephone	Number)	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, 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 \text{ Filing Fee } \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of State Certified Copy	us &

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.	Donovan Data Systems, 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.)	
	natural person of partices in not so contained in the name at present.)	
2.	New York 3. 13-2591831	
	New york (State or country under the law of which it is incorporated) (FEI number, if applicable)	
4.		
	(Date of incorporation) 5.	
6	Loan Qualification	
Ο.	(Date first transacted business in Fiorida. If corporation has not transacted business in Florida, insert "upon qualification.")	
	(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
7	115 WEST 18th STIRET, NEW YORK NH 10011	
/.	(Principal office address)	
	(Current mailing address)	
	(Current matting address)	
_		
8.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
	(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: CT Cor poration system	
Ωf	fice Address: 1200 South Pine Island Road	i
٠.	- 	ر
	(City), Florida 33324 (S) (Zip code)	
	(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.

Robert Letters, Special Assistant Secretary
(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: _ Vice Chairman: Address: ___ Address: _ Director: Address: _ **B. OFFICERS** President: Henry hauson Address: 115 west 18th Steet 110011 Vice President: Michael Koizim 7 Milford Close Address: white Plzing, NY 10606 Michael Koizim Secretary: __ "Same as sour Address: Treasurer: Michael Koizim Address: Seme ss above 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)

michael koizim, cfo Henry Lewson, President

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

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of DONOVAN DATA SYSTEMS, INC. was filed on 07/11/1967, under the name of DATANET INTERNATIONAL INC., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation. I further certify the following:

A certificate changing name to DONOVAN-DATA SYSTEMS INCORPORATED was filed on 11/01/1967.

A Certificate of Amendment was filed on 02/05/1968.

A Certificate of Amendment was filed on 06/10/1970.

A certificate changing name to DONOVAN DATA SYSTEMS INCORPORATED was filed on 09/14/1972.

A certificate changing name to DONOVAN DATA SYSTEMS, INC. was filed on 12/30/1982.

A Certificate of Amendment was filed on 10/10/198

A Certificate of Amendment was filed on 01/12/1990

Certificate of Change was filed on 06/05/1992

A Biennial Statement was filed 03/3171923

A Biennial Statement was filed 09722/1993.

A Biennial Statement was filed 07/18/11997.

A Biennial Statement was filed 07/29/1999.

I further certify, that no other documents have been filed by such Corporation.

01 MAR 26 AM 2: 2 SECRET/:XY OF STATI ***

Witness my hand and the official seal of the Department of State at the City of Albany, this 16th day of January two thousand and one.

Special Deputy Secretary of State

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