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DATE: 5-17-01

NAME: HH GLOBAL CAPITAL PARTNERS INC.

TYPE OF FILING: FOREIGN CORP. QUALIFICATION

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AUTHORIZATION: ABBIE/PAUL HODGE

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

								ED TO	
1.		HH Global Cap					PSE	4.7	
	(Name of corpora words or abbrevia	ntion; must include the ations of like import in partnership if not so	n language as will	clearly me at p	indicate that it i resent.)	is a corporation	instead of a	THE PARTY OF THE P	
2.	Delaware			3	65-	-1100354		. 40° 6.	
	(State or country	under the law of whi	ch it is incorporate	d)		(FEI number, i	f applicable)	18 K 3	
4.	April	18, 2001		_ 5.	Per	petual			
	(Date	of incorporation)			(Duration: Ye	ar corp. will cea	ase to exist or "p	erpetual")	
	(Date first transact	ted business in Florid (SI	a. If corporation h SE SECTIONS 607	as not t 1501,	ransacted busin 607.1502 and 8	ess in Florida, i 317.155, F.S.)	nsert "upon quai	ification.")	
7.	1451 W.	Cypress Creek				lerdale, F	L 33309	<u>-</u>	
			(Principal offic	clearly indicate that it is a corporation instead of a me at present.) 3. 65-1100354 d) (FEI number, if applicable) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual") as not transacted business in Florida, insert "upon qualification.") 7.1501, 607.1502 and 817.155, F.S.) 300, Fort Lauderdale, FL 33309 the address) 300, Fort Lauderdale, FL 33309 ag address) 11.0wed under Florida law the or country to be carried out in state of Florida) tent: (P.O. Box or Mail Drop Box NOT acceptable) 12. Suite 401 7. Florida 33431 (Zip code) 13. Suite 401 7. Florida 33431 (Zip code) 13. Suite 401 8. Service of process for the above stated corporation at the place cointment as registered agent and agree to act in this capacity. I unter relative to the proper and complete performance of my ons of my position as registered agent. 14. Purchase of this application to delivery of this application to cated, not more than 90 days prior to delivery of this application to					
	1451 W. (Cypress Creek				lerdale, F	L 33309	* * * * * * * * * * * * * * * * * * * *	
			(Current mailin	g addre	ss)				
8.									
9.	Name and stre	<u>et address</u> of Flori	da registered ag	ent: (P.O. Box or M	Mail Drop Box	NOT acceptab	ole)	
	Name:	HCRM Corp.	· . *	··· ·····		. ,	 ues		
Oi	ffice Address: _	2200 Corpora	ite Blvd. N.V	7., S	uițe 401	·	· ·*-	-	
	_	Boca Raton			, Florida_	33431			
		(City)				(Zip code)			
10). Registered ag	ent's accentance:							
H_{i}	aving been name	ed as registered ago	ent and to accept	servic	e of process fe	or the above s	tated corporati	on at the place	
de	signated in this	application, I here	by accept the app	ointm	ent as register	red agent and	agree to act in	this capacity. I	
ju. du	riner agree to co ities, and I am fa	mpty with the prov miliar with and ac	rsions of all stati cept the obligati	utes re ons of	iative to the p mv position a	roper and con s registered as	nplete perjorm oent.	ance of my	
			, , , , , , ,		.	~ · -g	5*****		
		Ω .	4	_					
		1/bht	1/funt	VF	}				
			(Registered age	nt's sig	nature)			-	
11	Upon qualification Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 1451 W. Cypress Creek Road, Suite 300, Fort Lauderdale, FL 33309 (Principal office address) 1451 W. Cypress Creek Road, Suite 300, Fort Lauderdale, FL 33309 (Current mailing address) to engage in any lawful business allowed under Florida law (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: HCRM Corp.								
2415	s nebaranen or	saw, by the secret	ary or state or of	uer on	iciai naving ci	ustogy of corp	orate records i	n the jurisdiction	

under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

Chairman:						0,		
						200	<u></u>	<u> </u>
Address:						(P)	4/2	1/20
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Vice Chairman:		- 	. maxim			7		4
Address:		4 .	¥ 2		<u></u>		W.	3
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Director:		· · · · · · · · · · · · · · · · · · ·						
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Address:						. '2 7''		
n officens		Mark	**************************************	- Age.	•		37	
B. OFFICERS								
	Peter Sebestyen							
	1010 SW 46 Avenue, #210				h	·······		fysicatory to
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Vice President:	Goar Akopian			F -		· · · -	. <u>.</u> .	
Address:	1010 SW 46 Avenue, #210	<u> </u>			· · · · · · · · · · · · · · · · · · ·		÷	
	Pompano Beach, FL 33069		-		= -	3		
Secretary:		ų.	· ·	See a see	6 · 1 .2	1.1 -		
Treasurer:								
			· 22 : · · ·					
NOTE: If nec	essary, you may attach an addendum	to the applic	cation listing	additional o	fficers an	d/or dire	ctors.	
13.	com							· · · · ·
****	(Signature of Chairman, Vice Chair	irman, or any	officer listed	in number	12 of the	appneat	ion)	
	Goar Akopian					 ;		, <u>192</u> 12

State of Delaware

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Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HH GLOBAL CAPITAL PARTNERS INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE FOR ASTATE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTEENTH DAY OF MAY A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE



Warriet Smith Windson Harriet Smith Windson, Secretary of State

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AUTHENTICATION: 1134854

DATE: 05-15-01