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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA** IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBM REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA I. RETRO-TECH 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.) 2 ILLINOIS (State or country under the law of which it is incorporated) (FEI number, if applicable) 4. SEPTEMBER 23,1993 (Date of incorporation) Upon qualification (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 2800 BERNICE RD. #17A, LANSING, ILLINOIS 60438 (Current mailing address) 8. RETRO-FITTING (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: C T Corporation System Office Address: 1200 South Pine Island Road Plantation 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. C T Corporation System Jeffrey R. Graves Assistant Secretary

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable) FL019 - 9/2/99 C T System Online

which it is incorporated.

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

A. DIREC	CTORS (Street address only - P.O. Box NOT acceptable)	<b>,</b>		
Chairman:	- PE	<u>_</u>	3	
Address: _				
_		2 B	0	
Vice Chair	rman:	7 4 4 A	<u></u>	
Address:		8 m	<del>S</del> —	
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Director:	STUART KIRSCHT		<del>-</del> .	
Address:	999 GENIUS DRIVE		<del></del>	
	WINTER PARK, FL 32789		- ±2	
Director:	STEVE ROSHOLT			
Address:	11737 N 129TH WAY			-
B OFF	SCOTTSDALE, AZ 85259 ICERS (Street address only - P.O. Box NOT acceptable)			-
	KURT T MINKO			<del>-</del>
	7900 W 82ND COURT			_
Address:	CROWN POINT, IN		· · · · · ·	_
	Student.			<u>.</u>
Address:	2.53 3.5		<u>.</u>	_
	ST. JOHN, IN			_
	y: KURT MINKO			
Address:	7900 W 82ND COURT			_
	CROWN POINT, IN			_
Treasure	er: GARY MAYNARD		•	<del>-</del>
Address	: 9120 SCHILLRON DRIVE		:	<del>-</del> .
NOTE	ST. JOHN, IN 46313  If necessary, yes may attach an addendum to the application listing additional officers and/or directors.	-	<del></del>	<b>—</b> .
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)			<del></del> ,.
14. <u>¥</u>	Kurt Minko President (Typed or printed name and capacity of person signing application)		Δ τ	_



## To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that



Desse White