# FOR CONTRANSMITTAL LETTER OF G

Division of Corpora			
SUBJECT: VINTA	Ei Comesi	TING OF K	17 -
		ration - must include suff	ix)
Dear Sir or Madam:			
The enclosed "Application Is "Certificate of Existence", a to transact business in Florid	no cneck are submitted	for Authorization to Tran to register the above refe	nsact Business in Florida", exenced foreign corporation
Please return all corresponde	GAROFAL	atter to the following:	000047178596 -12/11/0101014001 *****87.50 *****87.50
1/		e of Person)	
VINTAGE CO	NTLACTING		TAL
	-/ 1	(Company)	
_ 5// /6	- HVEN	<del></del>	
2	(A	ddress)	
1DELMAR		02218	
	(City/Sta	te and Zip code)	
For further information conce	erning this matter, pleas	se call:	
1 1	,	20	52
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399		MAILING ADDRESS Registration Section Division of Corporate P.O. Box 6327 Tallahassee, FL 323	ions Her Her D
Enclosed is a check for the for	llowing amount:	•	inte
	78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 12, 2001

ANTHONY GAROFALO 811 16TH AVENUE BELMAR, NJ 07719

SUBJECT: VINTAGE CONTRACTING OF N.J., INC.

Ref. Number: W01000028312

We have received your document for VINTAGE CONTRACTING OF N.J., INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days for your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Michael Mays Document Specialist

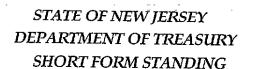
Letter Number: 101A00065307

## 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 CONTROL DESIRVED IN THE STATE OF PLOKIDA.
1. VINTAGE CONTRACTING OF N.J. THE
(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.)
/ - I all mano at presont.)
2. NEW SELSEY 3. 22-2921408
) ( mandet, in applicable)
4. COTOBER 3 1988 5. MERPETUAL
(Saturdin: Teat colp. will cease to exist of "perpetual")
6. Open Chauticasini.
(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.)
7. 8/1 16TH AVE BELMAR NJ 07219
(Principal office address)
-011 16th HUE BEIMAK NJ 07219
(Current mailing address)
8. (ONSTRUCTION) LAYUALLY AINTING.
(Purpose(s) of corporation authorized in home state or account
The state of Florida Telephone State of Country to be carried out in state of Florida Telephone
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
$C = \mathbb{Z}_{2}^{n}$
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: The Kenthal To
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Jay Keasan JR
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Jay Keasan JR
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Jay Kensan JR  Office Address: 208   AKEPARSON (DREEN A)T 1310
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Jay Keasan JR  Office Address: 208 Jake Parson Green Apr 1310
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Jay Keasan JR  Office Address: 208   AKe Parson (Dresent Apr 1310)  Beanson , Florida 335//
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Jay Keasan JR  Office Address: 208 Jake Parson Green Apr 1310
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Jay Kensan JR  Office Address: 208   AKe Parson (Dreen Apr 1310  Branson (City) (Zip code)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Jay Keaban JR  Office Address: 308   Aka Parson (Traffic)   Apr 1310  Beanson (City) (Zip code)  10. Registered agent's acceptance:
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Jay Kensan JR  Office Address: 208   AKE PARSON (DREEN Apr 1310)  Registered agent's acceptance:  Having been named as registered agent and to accept service of process for the street agent and to accept service of process for the street agent and to accept service of process for the street agent and to accept service of process for the street agent and to accept service of process for the street agent and to accept service of process for the street agent and to accept service of process for the street agent and to accept service of process for the street agent and to accept service of process for the street agent agent and to accept service of process for the street agent agent and to accept service of process for the street agent agent agent and to accept service of process for the street agent agen
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Jay Keaban JR  Office Address: 208   Ake Jacson Green Apr 1310  Beautiful City), Florida 335// (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 of the service of process for the above stated corporation at the place
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Jay Readan JR  Office Address: 308   Ake Parson Prices   Apr 1310   Branch   Branch   Apr 1310   Branch   Branch
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Jay Readan JR  Office Address: 308   Ake Parson Prices   Apr 1310   Branch   Branch   Apr 1310   Branch   Branch
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9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Jay Readan JR  Office Address: 308   Ake Parson Prices   Apr 1310   Branch   Branch   Apr 1310   Branch   Branch

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: Anthony Cranofaco
Address: 811 1674 AVENUE
BEIMAR NJ 07719
Vice Chairman: LEFE / 1206
Address: f/1 16 TH AVENUE
13=1MAR NJ 07715
Director:
Address:
Director:
Address:
B. OFFICERS
President: ANTHONY GARAFALO
Address: FII 18 TH AVENUE
BELMAR NJ 077/9
Vice President: LESTE / JEOG ST
Address: f// 16 TH AVENUE
BELMAR NJ 07718
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Just a folo
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. The House Carlo Harabetta - Press.  (Typed or printed name and capacity of person signing application)



### VINTAGE CONTRACTING OF N.J., INC.

With the Previous or Alternate Name

VINTAGE CONTRACTING (Alternate Name)
VINTAGE PAINTING CO., INC. (Previous Name)
VINTAGE PAINTING AND DRYWALL CO. (Alternate Name)

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on October 3, 1988.

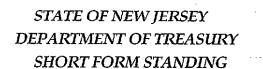
As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

James Karlinski, Esq 103 West 2nd Avenue Howell, NJ 07731

Continued on next page . . .

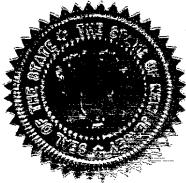
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### VINTAGE CONTRACTING OF N.J., INC.

With the Previous or Alternate Name
VINTAGE CONTRACTING (Alternate Name)

VINTAGE PAINTING CO., INC. (Previous Name)
VINTAGE PAINTING AND DRYWALL CO. (Alternate Name)



IN TESTIMONY WHEREOF, I have

hereunto set my hand and affixed my Official Seal at Trenton, this 26th day of December, 2001

Peter R Lawrance Acting State Treasurer

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