	01-24 '02 15:43 ID:CSC TALLAHASSEE FAX:850 5211010 Convertions QOODOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOO	Page 1 of 2
	Florida Department of State Division of Corporations Public Access System Katherine Harris, Secretary of State Electronic Filing Cover Sheet	FILED SECRETARY OF S TALLAHASSEE, FL 02 JAN 24
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	To: Division of Corporations Fax Number : (850)205-0383 From: Account Name : CORPORATION SERVICE COMPANY Account Number : 12000000195 Phone : (850)521-1000 Fax Number : (850)521-1030	
: · ·	FOREIGN PROFIT QUALIFICATION METAL MARKETPLACE I, INC.	D2 JAN 24 PH 3: 49
	Certificate of Status 0   Certified Copy 0   Page Count 5   Estimated Charge \$70.00	NDA 5

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## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 24, 2002

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CORPORATION SERVICE COMPANY

SUBJECT: METAL MARKETPLACE I, INC. REF: W02000002045

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please include the exhibit(s) referred to in your document.

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Agnes Lunt Document Specialist FAX Aud. #: H02000021555 Letter Number: 802A00004054 PAGE 2/5\_

SECRETARY OF STATE TALLAHASSEE, FLORID

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FILE No.646 01/24 '02 15:43 ID:CSC TALLAHASSEE FAX:850 5211010 PAGE 3/	5
JAN-22-2002 TUE 12:10 PM THOMAS L. ABRAMS, P. A. FAX NO. 954 523 0997 P. 03/03	,-
H020000215556	
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA	
IN COMPLIANCE WITH SECTION 607.1563, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	
1. <u>Metal Marketplace T. Inc.</u> (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 paramership if not so contained in the name at present.)	
2. <u>Pennsylvania</u> (State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. January 1981 5. "perpetual" (Date of incorporation) 5. "Derpetual" (Duration: Year corp. will cease to exist or "perpetual") 7. 7.0	
6. Upon Qualification (Date fust transacted business in FlorIda. If corporation has not transacted business in Florida. Insen "upon qualification.") (SEE SECTIONS 607.1501. 607.1502 and 817.155. F.S.) 7. 740 Sansom St., 5th Floor, Philadelphia, PA 19106 (Principal office address)	-
Same as above	`
(Current mailing address)	
8. Sale of products (Puppose(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: Corporation Service Company	
Office Address: 1201 Hays Street	-
Tallehassee , Florida 32301 (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.	

Corporation Service Company	Colena Lynette Coleman
- Aspilla	allna Toleman
(Registered agent's :	signature) as its agent

11. Attached is a certificate of existence duly anthenticated, 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.

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	isiness address	es of officers and/or directi	512:	
A. DIRECTORS	1			
Chairman: <u>Anthor</u>	ny Acquaviv	<u>7a</u> _		
Address: <u>740</u>	SANS	OM STREET	5 de FL	
PHI	LADEL	PHIA, PA-191	<u>e</u> ( <u></u>	
Vice Chairman:				TAL
Address:	······································			LAT
				D2 ASS
Director:				JAN EOD
Address:				FLO FLO
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Director:				
Address:				
<b>B. OFFICERS</b>				
•		va		
President:Antho	ny Acquavi			
Presiden: <u>Antho</u> Address: <u>740</u> S	ny Acquaviv ansom Stree	et 5th Floor		
Presiden: <u>Antho</u> Address: <u>740 S</u> <u>Phila</u>	nv Acquaviv ansom Stree delphia, PA	et 5th Floor A_ 19106		
Presiden: <u>Antho</u> Address: <u>740 S</u> <u>Phila</u>	ansom Stree delphia, P/	<u>et 5th Floor</u> A. 19106		
President: <u>Antho</u> Address: <u>740 S</u> <u>Phila</u> Vice President:	ny Acquaviy ansom Stree delphia, PA	<u>et 5th Floor</u> A. 19106		
President:Antho Address:740_S Phila Vice President: Address:	ny Acquavi ansom Stree delphia, P/	et 5th Floor A_ 19106		
President:Antho Address:740_S Phila Vice President: Address: Secretary:	ny Acquaviv ansom Stree delphia, P/	et 5th Floor A_ 19106		
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President:Antho Address:740_S Phila Vice President: Address: Secretary: Address: Treasurer;	ny Acquavi ansom Stree delphia, P/	et 5th Floor A_ 19106		
President:Antho Address:Ad S Phila Vice President: Address: Secretary: Address: Treasurer; Address:	ny Acquavi ansom Strey delphia, P/	et 5th Floor A_ 19106		
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President:Antho Address:AO_S Phila Vice President: Address: Secretary: Address: Treasurer: Address: NOTE: If necessary	ny Acquaviv ansom Strey delphia, P/	et 5th Floor A 19106 A an addendum to the applica	tion listing additional officers and/or directo	NF\$,
President:Antho Address:AO_S Phila Vice President: Address: Secretary: Address: Treasurer: Address: NOTE: If necessary	ny Acquaviv ansom Strey delphia, P/	et 5th Floor A 19106 A an addendum to the applica	tion listing additional officers and/or directo	NF\$,

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IN TESTIMONY WHEREOF. I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth JSOW

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RX TIME 01/23 '02 14:11

LOCATION: