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Un'ted TheA. CORPORATE NAME & DOCUMENT#)	tres, Inc.	RECENT OF N
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CORPORATE NAME & DOCUMENT #)		**

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO **BUSINESS IN FLORIDA**

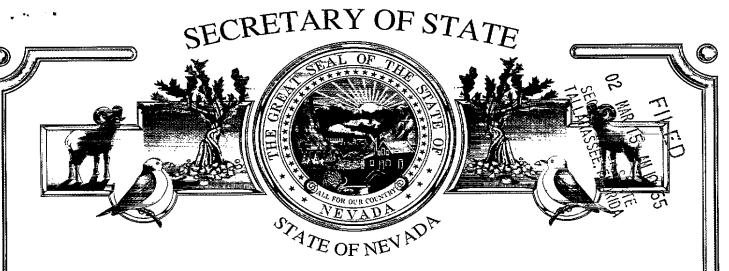
N COMPLIAN LEGISTER A F	CE WITH SECTION 6 OREIGN CORPORAT	07.1503, FLORIDA	STATUTES, THE	E FOLLOWING I	S SUBNATTED TO
	Theatres, Inc.		I BOSETESS ET 1	IME SIALE OF I	E ST E
(Name of cor words or abbr	poration; must include the eviations of like import is or partnership if not so	word "INCORPOR	early indicate that it	NY", "CORPORA' t is a corporation in	TION OF
Nev	- ada		<b>3</b> 88-05	08025	
(State or count	ry under the law of which	h it is incorporated)		(PEI number, if a	pplicable)
9/13/01		5	Perpetual		
<b>ው</b> 1/13/02	ate of incorporation)	, ,	Duration: Year co	rp. will cease to ex	ist or "perpetual")
<u>- 7465 w</u>	. Lake Mead Bl	vd. #200, L.  (Principal office as	01, 607.1502 and 81 as Vegas, N idress)	17.155, F.S.)	
	Box 370967, La	S Vegas, NV (Current mailing a			
	eaters (s) of corporation author ceet address of Florida		_		,
Name:	Charles Harri	son, Attorne	<u>ey-a</u> t-1aw		
ice Address:	1413 Trovilli	on Avenue			
	Winter Park	-		32789 (Zip code)	
Registered a	gent'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 heraby 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.

(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 director	<b>9</b> :		
L DIREC	TORS	•	Ŧ	<b>~</b> '
Chairman:	Charles J. Karabes	-		TASE OF
\ddress: _	P. O. Box 370967		-	至 第 声
	Las Vegas, NV 89137			555
ice Chairn	ian:		<del>(* (* - , - , - , - , - , - , - , - , - , - </del>	巴马 奇
			<u> </u>	<b>多点</b> 5
			<del>-                                    </del>	——————————————————————————————————————
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idress:	-		¥	
OFFIC	ERS		<u>.                                    </u>	
				,
	Charles J. Karabes			
	7465 W. Take Mead Blvd. #20			•
	Las Vegas, NV 89128			,
	#: _Jacqueline Weimar			
	501 N. Orlando Avenue #21	9	<del></del>	
	Winter Park, FL 32789	-		
retary:	Gayle Karabes			
iress:	P. O. Box 370967			- 
	Las Vegas, NV 89137	-	<del> </del>	•
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iress:			·····	
· manage				
TE: If no	ecessary, you may attach an addendum to the app	ication listing additional	officers and/o	r directors
		cerelent		
	(Signature of Chairman, Vice Chairman, or ar	<del> </del>	er 12 of the app	lication)
	Charles J. Karabes, President		•	-



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence **UNITED THEATRES, INC.** as a Corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since **September 13, 2001**, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Las Vegas, Nevada, on **March 6, 2002.** 

Secretary of State

Certification Clerk

