S. DAVID SHEFFMAN, J.D., LL.B. ATTORNEY/MEDIATOR

000007008070--0 08/09/02--01017--003 *****78.75 *****78.75

1111 LINCOLN ROAD **SUITE 802** MIAMI BEACH, FLORIDA 33139 TEL 305-868-0727 Fax 305-861-4729

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NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger Amendment Resignation of R.A., Officer/Director	A STATE OF THE STA
OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other	1
CR2E031(7/97)	Examiner's Initials	217
644-611	WOD -	



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

August 12, 2002

S. DAVID SHEFFMAN, 1111 LINCOLN ROAD STE. 802 MIAMI BEACH, FL 33139

SUBJECT: OUR TERMS FABRICATORS, INC.

Ref. Number: W02000023177

02 AUG 26 AN 8: 43

We have received your document for OUR TERMS FABRICATORS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

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

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

Marsha Thomas Document Specialist

Letter Number: 802A00047699

APPLICATION BY FOREIGN CORPÓRATION 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	ur Jerms Fab	cicators	. Inc	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(Name of corpo words or abbrev	ration; must include the word "INC viations of like import in language as or partnership if not so contained in	ORPORATED", "(s will clearly indica	COMPANY", "CORPORATION te that it is a corporation instead	N° or CO	*
2. Neu	under the law of which it is incorpo	3	11 27 5220	14 3 62	हे हुँ राज्यक इन्हरू
(State or country	under the law of which it is incorpo	orated)	(FEI number, if applic	able)	
4	uly 9,1985	<u> </u>	perpetual		
6	e of Incorporation) Upon Cted business in Florida, If corporation	Qualifica (tion: Year corp. will cease to e	xist or "perpetual")	en jege
, — 	and a deputere mi i fortest. Ti corhors	2 607 1501 607 14	ted business in Florida, insert	upon qualification.")	**
	(Principal	office address)	/		r removed and
	59 m e (Current r				
	(Current r	nailing address)			
8. For pro-	Gurrent r. Lit Corporation of corporation authorized in home	state or country to	e fabrication be carried out in state of Florid	of glass	4 mirror
9. Name and stre	<u>eet address</u> of Florida registere	ed agent: (P.O. E	Box or Mail Drop Box <u>NOT</u>	acceptable)	
Name: _	S. David She	Hman	,		
Office Address:	Miani Beach (City)	Rd. #	802	· · · · · · · · · · · · · · · · · · ·	
_	Miani Beach		Florida 33139		
	(City)	, _ _, -	(Zip code)		712 TO .
Having been nam designated in this further agree to co	gent's acceptance: ed as registered agent and to ac application, I hereby accept the omply with the provisions of all amiliar with and accept the obli	cept service of pr appointment as statutes relative	rocess for the above stated c registered agent and agree to the proper and complete	to not in this cames	ie. I
	(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 directors:

A. DIRECTORS		-				
Chairman:	John	Fries				
Address:		Bell St.				
	W.	Babylow	N.Y.	11704		
		D'arrige			<u></u>	
Vice Chairman:	(کر ہر	- · · · · · · · · · · · · · · · · · · ·				-
Address:	35	Bell St.	MY	11704		
	w.	Dasylon	10 /	11704		
Director:		<u> </u>				
Address:						
						1-1-
Director:	···		·		m	
						02
Address:					andrea b	
			Jan Barrer			
B. OFFICERS	ا جسم					
President:	John	tries				
Address:	33 E	rell St.			- 313 .	
	h. P	iabylow	NY. I	1704	250	نت
Vice President:						
	24	Bell St.	<u> </u>			
Address:				1,-7416		
	N -	Dab.flow	, <i>10,7</i> .	11704		
Secretary: Grey	. Dacci	50		No.17		
Address						
Treasuror: CA	by D'ac	r: 20	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Address:	3	U				
11041000						
NOTE: If necessary, y	you may attach ar	addendum to the a	pplication list	ing additional office	rs and/or direct	iors.
12	1 21/					
(Sigua	ture of Chairman	, Vice Chairman, o	r any officer li	sted in number 12 of	f the application	n)
14. <u>GREG</u>	ory D	PARRIGO		ening application)		
	(Typed or print	ed name and canaci	ity of person si	ening application)		

: ... : *-

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of OUR TERMS FABRICATORS, INC. was filed on 07/09/1985, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 24th day of July two thousand and two.

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