TAISMITALETTE 363

TO: Registration S Division of Co		in Inc.	300007340923 -08/26/0201062001
SCOOLECT.		rporation - must include sur	
Dear Sir or Madam:			· —
"Certificate of Exister to transact business in	nce", and check are submit Florida.	tted to register the above re	ansact Business in Florida", eferenced foreign corporation
Please return all corre	spondence concerning this	s matter to the following:	
PAUL.	DUNN		
	(N	ame of Person)	
<u>CAK G</u>	YM INC		
	(Fi	irm/Company)	
1360 5	OCRAN	B/VD #	70/
Pompa	NO ROAC	(Address)	Wy.
	(City,	/State and Zip code)	
For further information Paul Da (Name of Pers	at (Son)		
STREET ADDRESS: Registration Section Division of Corporatio 409 E. Gaines St. Tallahassee, FL 32399	ns	MAILING ADDR Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 3	on rations
Enclosed is a check for	the following amount:		
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status		& □ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITT REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	ED TO
1. CAR GIVES IN THE STATE OF FLORIDA.	
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate the same of the company	
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 Gare OF NOVOZA	
(State or country under the law established) 3. BO-0044 910	
2. State of Nevada 3. 80-0044 9/8 (State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. MALCH 19,2001 5 = PODPOTUAL	
4. MARCH 19 2001 (Date of incorporation) (Duration: Year corp. will cease to exist or "per	
6. UPON OUALF ICATION: Year corp. will cease to exist or "perpotential of the first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification of the first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification of the first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted business in Florida, insert "upon qualification of the first transacted bus	petual")
(Date first transacted business in Florida 15	
(SEE SECTIONS 607 1501 607 1502	cation.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	,
7. 1360 S. OCRAN BIVO # 701 Pompano Bol FI (Principal office address)	7201-
(Principal office address)	33062
(Current mailing address)	1
(Current mailing address)	9 F/ 3306.
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8. MANUFUCTURE AND Sell EXERCISE SYSTEM (Purpose(s) of corporation authorized in home state or country to be sent to be	
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
state of 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)	2 N.S
Name: PAUL P. Dunn	SECRETARY DIVISION OF CO
Office Address: 17/2 C 00 - 1 7/	6 CR
once Address. 1367 J OCLAL KIND TE 70 J	
Office Address: 1360 S. OCEA- Blvo #701	(2) "111
POMPANO BEACH Florida El 22010	(2) "111
Pomparo Beach Florida F/ 33062	OF STATION ORPORATION
(City) Beach Florida F/ 33062 (Zip code)	(2) "111
Pomparo Beach Florida F 33062 (City) (Zip code) 10. Registered agent's accentance:	OF STATE OF
City) Registered agent's acceptance: Having been named as registered agent and the	OF STATE OR OR OTHER OF STATE OR OTHER OF STATE OR OTHER OF STATE
(City) 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated cornoration designated in this application. I have been accept service of process for the above stated cornoration.	OF STATE ORPORATIONS
(City) 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation designated in this application, I hereby accept the appointment as registered agent and agree to act in this	OF STATE ORPORATIONS
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(City) Beach Florida F/ 33062 (Zip code)	OF STATE OR OR OF STATE OF STATE OR OR OF STATE OR OF STATE OR OF STATE OF

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: Address: ____ Vice Chairman: Address: Director: _ Address: Director: _ Address: __ **B. OFFICERS** President: PAUL P. DUNN Vice President: Robert FART LAUDERDA/e FL Secretary: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) PAUL P. DUNN - PRESIDENT (Typed or printed name and capacity of person signing application)



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, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts 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, **CAR GYM, 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 March 19, 2001, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my and affixed the Great Seal of State, at my office, in Carson City, Nevada, on August 15, 2002.

DEAN HELLER

Secretary of State

Certification Clerk