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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

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-09/06/02--01042--001
*****87.50 *****87.50

SUBJECT: PINNACLE FINANCE & INVESTMENT GROUP, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

RONALD BOOKER
(Name of Person)
PINNACLE FINANCE & INVESTMENT GROUP, INC.
(Firm/Company)
5201 BLUE LAGOON DRIVE SUITE 800
(Address)
MIAMI, FL 33126
(City/State and Zip code)

For further information concerning this matter, please call:

SCARLETT KING at (305) 467-0095
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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DIVISION OF CORPORATIONS

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**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. PINNACLE FINANCE & INVESTMENT GROUP, INC.
(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.)
2. DELAWARE 3. 41-2029974
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. JANUARY 3, 2000 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. JULY 30, 2000
(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. 5201 BLUE LAGOON DRIVE STE 800 MIAMI, FL 33126
(Principal office address)
- 5201 BLUE LAGOON DRIVE STE 800 MIAMI, FL 33126
(Current mailing address)
8. FINANCIAL CONSULTING
(Purpose(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: RONALD BOOKER
Office Address: 5201 BLUE LAGOON DR. STE 800
MIAMI, Florida 33126
(City) (Zip code)

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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.


(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: RONALD BOOKER

Address: 5201 BLUE LAGOON DRIVE STE 800
MIAMI, FL 33126

Vice Chairman: JUANITA CMAFT

Address: 5201 BLUE LAGOON DRIVE STE 800
MIAMI, FL 33126

Director: SHARLETT KING

Address: 5201 BLUE LAGOON DRIVE STE 800
MIAMI, FL 33126

Director: TAMARA KELLER

Address: 5201 BLUE LAGOON DRIVE STE 800
MIAMI, FL 33126

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Ronald Booker
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. RONALD BOOKER - DIRECTOR
(Typed or printed name and capacity of person signing application)

Delaware

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The First State

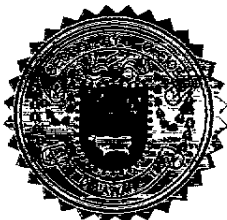
I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PINNACLE FINANCE & INVESTMENT GROUP, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF MARCH, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PINNACLE FINANCE & INVESTMENT GROUP, INC." WAS INCORPORATED ON THE THIRTEENTH DAY OF JANUARY, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 1672459

DATE: 03-18-02