

# F02000005791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

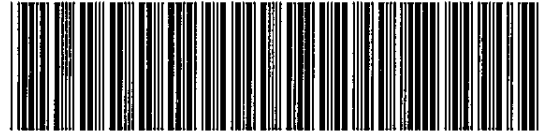
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JB  
11-20-02

Capitol Services, Inc.

1406 Hays St., Suite 2

Tallahassee, FL 32301

(850) 878-4734

Kathi or Brent

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. IAEG, Inc.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

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☐ Will wait

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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

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☒ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

STATE OF FLORIDA  
DEPARTMENT OF REVENUE  
TALLAHASSEE, FLORIDA

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APPROVED  
AND  
FILED

Examiner's Initials

# 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.

IAEG, INC.

1. IAEG, 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. Pending  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 11/14/02 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.135, P.S.)
7. 901 Ponce de Leon Blvd. Coral Gables, FL 33134  
(Principal office address)
- (Current mailing address)
8. Web design and marketing.  
(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: Paralegal & Attorney Service Bureau, Inc. ✓  
Office Address: 1406 Hays Street-#2 M930916  
Tallahassee , 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.

[Signature]  
(Registered agent's signature)

Ruthleen J. Hill, Pres.

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.

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**12. Names and business addresses of officers and/or directors:****\*A. DIRECTORS**

Chairman: Victor Minca  
Address: 901 Ponce de Leon Blvd.-#303  
Coral Gables, FL 33134

Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: John J. McAuliffe  
Address: 1060 Maitland Center Commons-#215  
Maitland, FL 32751

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

**B. OFFICERS**

President: Victor Minca  
Address: 901 Ponce de Leon Blvd.-#303  
Coral Gables, FL 33134

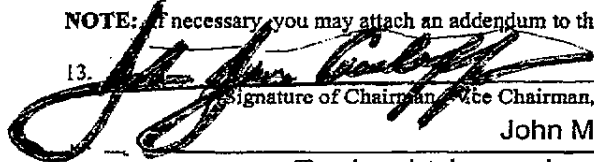
Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_

Secretary: Victor Minca  
Address: 901 Ponce de Leon Blvd.-#303 Coral Gables, FL 33134

Treasurer: Victor Minca  
Address: 901 Ponce de Leon Blvd.-#303 Coral Gables, FL 33134

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

13.



-John McAuliffe, Treasurer

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

John McAuliffe, Treasurer

(Typed or printed name and capacity of person signing application)

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# Delaware

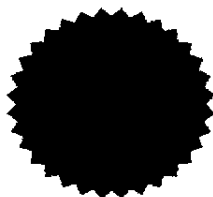
PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IAEG, 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 NOVEMBER, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 2096312

020709389

DATE: 11-18-02