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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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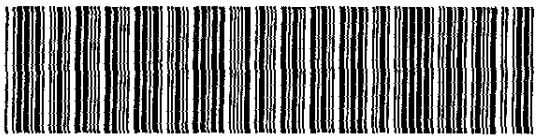
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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F2403

**ANNELEN CORPORATION**

P.O. Box 4142

**SARASOTA, FL 34230**

**941-926-1820**

**941-926-3229 FAX**

January 20, 2003

Florida Department of State  
Registration Section, Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32341

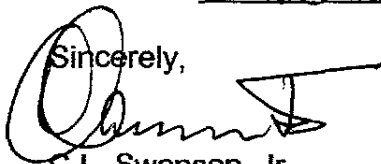
To Whom It May Concern:

Please find enclosed the material necessary to register a foreign Corporation in the State of Florida.

1. Original Certificate of existence from the State of Delaware dated 11.20.3002.
2. Application by foreign Corporation for authorization to transact business in Florida.
3. Check in the amount of \$87.50 covering the filing fee, Certificate of Status and Certified Copy.

Should you have any questions, I may be reached at the above address or phone number or [chuckjr@swansons.net](mailto:chuckjr@swansons.net).

Sincerely,



C.L. Swanson, Jr.  
Secretary

APPROVED  
AND  
FILED  
03 JAN 23 AM 10:01  
REGISTRATION SECTION  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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. ANNELEN CORPORATION  
(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 (State or country under the law of which it is incorporated) 3. 52-2082451 (FEI number, if applicable)

4. 02.09.1998 (Date of incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION - 1.1.2003 (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. 4424 CAMINO REAL SARASOTA, FL 34231 (Principal office address)

P.O. BOX 4142 SARASOTA FL 34230 (Current mailing address)

8. To Engage in any lawful act or activity for which corporations may be organized (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Under the General Corporation Law

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Delaware.

Name: C.L. SWANSON JR

Office Address: 4424 CAMINO REAL

SARASOTA, Florida 34231 (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.

[Signature] (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: C. L. SWANSON JR  
Address: 4424 CAMINO REAL  
SARASOTA FL 34231

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

Director: MARTHA A. SWANSON  
Address: 4424 CAMINO REAL  
SARASOTA, FL 34231

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

B. OFFICERS

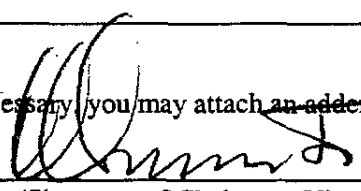
President: MARTHA A. SWANSON  
Address: 4424 CAMINO REAL  
SARASOTA, FL 34231

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

Secretary: C. L. SWANSON JR  
Address: 4424 CAMINO REAL SARASOTA, FL 34231

Treasurer: \_\_\_\_\_  
Address: \_\_\_\_\_

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

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

14. C. L. SWANSON JR / CHAIRMAN  
(Typed or printed name and capacity of person signing application)

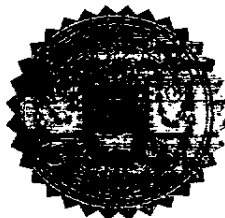
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03 JUN 29 AM 10:01  
ATTN: AND  
FILE

# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ANNELEN CORPORATION" 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 TWENTIETH DAY OF NOVEMBER, A.D. 2002.



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

2856605 8300

AUTHENTICATION: 2101705

020713538

DATE: 11-20-02