

FO3 000001563

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

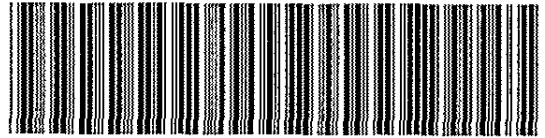
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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03/13/03--01056--002 **70.00

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FO3-1563
1-1-03



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 14, 2003

JAIME PARLADE
8350 NW 52ND TERRACE, SUITE 301
MIAMI, FL 33166

SUBJECT: HIGHWAYS, INC.
Ref. Number: W03000007376

We have received your document for HIGHWAYS, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 103A00016124

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CERTIFIED PUBLIC ACCOUNTANTS

8350 N.W. 52nd Terrace, Suite 301
Miami, Florida 33166
1-800-776-1099
Tel: (305) 591-8850
Fax: (305) 593-9883

March 28, 2003

Ms. Tammi Cline
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

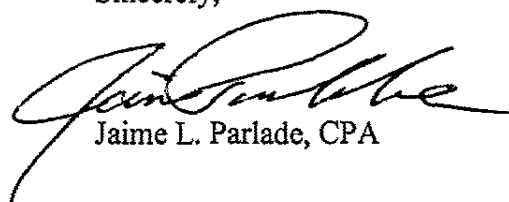
RE: **Highways, Inc.**
Ref. No. W03000007376

Dear Ms. Cline:

As requested by your notice dated March 14, 2003 (see copy enclosed), please find an original copy of a certificate of good standing from the state of Delaware. I would greatly appreciate it if you can notify me once the application has been fully processed.

Should you have any questions or require any additional information, please do not hesitate to contact me at (305) 591-8850 ext. 209.

Sincerely,



Jaime L. Parlade, CPA

Encl.

cc: Jean-Francois Leon

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HIGHWAYS, 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:

JAIME L. PARLADE, CPA

(Name of Person)

SPEAR, SAFER, HARMON & CO.

(Firm/Company)

8350 NW 52ND TERRACE, SUITE 301

(Address)

MIAMI, FLORIDA 33166

(City/State and Zip code)

TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

JAIME L. PARLADE

(Name of Person)

at (305) 591-8850, EXT. 209

(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

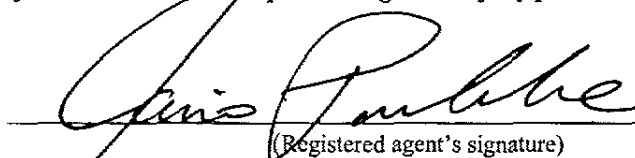
**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*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. HIGHWAYS, 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. 65-0904423
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. MARCH 23, 1999 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATIONS
(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. 1220 N. MARKET STREET, SUITE 606, WILMINGTON, DE 19801
(Principal office address)
1521 ALTON ROAD, SUITE 336, MIAMI BEACH, FLORIDA 33139
(Current mailing address)
8. COLLECTING MUSIC PROMOTION FEES
(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: JAIME L. PARLADE
Office Address: 8350 NW 52ND TERRACE, SUITE 301
MIAMI, Florida 33166
(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.


(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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: N/A

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: JEAN-FRANCOIS LEON

Address: 1521 ALTON ROAD, SUITE 336

MIAMI BEACH, FLORIDA 33139

Vice President: _____

Address: _____

Secretary: _____

Address: _____

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. JEAN-FRANCOIS LEON, PRESIDENT

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

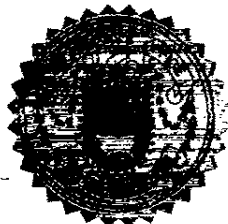
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Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HIGHWAYS 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 TWENTIETH DAY OF FEBRUARY, A.D. 2003.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3020297 8300

AUTHENTICATION: 2266883

030110706

DATE: 02-20-03