# F03 000001713

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
☐ PICK-UP ☐ WAIT ☐ MAIL				
(Business Entity Name)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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Office Use Only



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#### TRANSMITTAL LETTER

	Registration Section Division of Corporations			
SUBJE	CT: Pentech Consulting Group, Inc.			
(Name of corporation - must include suffix)				
Dear Sir	or Madam:			
"Certific	losed "Application by Foreign Corporation for A ate of Existence", and check are submitted to react business in Florida.			
Please re	eturn all correspondence concerning this matter	to the following:		
Kenn	eth A. Norman, Esquire			
(Name of Person)				
McCa	& Perry, P.A. 토를 끌			
(Firm/Company)				
2400 S.E. Federal Highway, Fourth Floor				
	(Addre	ess) $\frac{2^{10} \text{ C}}{10^{10}}$		
Stuar	rt, FL 34994	:		
	(City/State a	nd Zip code)		
For furth	ner information concerning this matter, please co	all:		
Kenneth A. Norman at ( 772 ) 286-1700				
(Name of Person) (Area Code & Daytime Telephone Number)				
Registrat Division 409 E. G	T ADDRESS: tion Section of Corporations Gaines St. see, FL 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed	d is a check for the following amount:			
☐ \$70.0	00 Filing Fee \$\square\$ \$78.75 Filing Fee \$\square\$ Certificate of Status	\$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy 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.

. Pentech C	Consulting Group, Inc.	
words or abbre	oration; must include the word "INCORPORAT viations of like import in language as will clear or partnership if not so contained in the name a	ly indicate that it is a corporation instead of a
New Jerse	У 3	22-3456787
-	y under the law of which it is incorporated)	(FEI number, if applicable)
July 17,	1996	Perpetual
	te of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
Upon qua	alification	
-	-	of transacted business in Florida, insert "upon qualification.") 1, 607.1502 and 817.155, F.S.)  990  dress)
4641 SW	Long Bay Drive, Palm City, FL 34	990
	(Principal office add	dress)
Same as	above	
	(Current mailing ad-	dress)
Software 0	Consulting	▶
(Purpose	(s) of corporation authorized in home state or c	ountry to be carried out in state of Florida)
. Name and st	reet address of Florida registered agent:	(P.O. Box or Mail Drop Box NOT acceptable)
Name:	Kenneth A. Norman, Esquire	<del></del> .
office Address:	2400 SE Federal Highway, 4th Flo	oor
	Stuart,	, Florida <u>34994</u>
	(City)	(Zip code)

#### 10. Registered agent's acceptance:

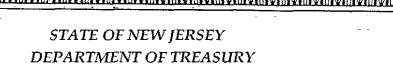
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative 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.

### 12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: \_ Address: \_ Vice Chairman: \_\_ Address: \_\_ Director: \_ Address: Director: \_ Address: B. OFFICERS President: Address: Vice President: Address: Secretary: \_ Address: \_ Treasurer: Address: \_\_\_\_ NOTE: If hecessary, 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)

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



#### PENTECH CONSULTING GROUP, INC.

SHORT FORM STANDING

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on July 17, 1996.

As of the date of this certificate, said business continues as an active business in the State of New Jersey. Annual Reports are outstanding for the following year(s):

1998

I further certify that the registered agent and registered office are:

Penny Ann Quebbeman 3605 Ravens Crest Dr Plainsboro, NJ 08536

Continued on next page . . .



# STATE OF NEW JERSEY DEPARTMENT OF TREASURY SHORT FORM STANDING

PENTECH CONSULTING GROUP, INC.

IN TESTIMONY WHEREOF, I have

hereunto set my hand and affixed my Official Seal at Trenton, this 27th day of February, 2003

Johnerson

John E McCormac, CPA State Treasurer

