

F03000001942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

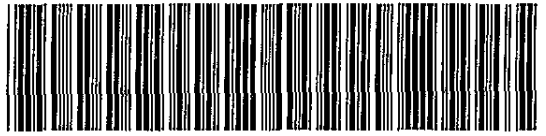
(Business Entity Name)

(Document Number)

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

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03/24/03--01092--008 \*\*78.75

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DIVISION OF CORPORATIONS  
03 APR 17 PM 3:23

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** E JAM IT SOLUTIONS 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:

FRAZER JOHNSON (Name of Person) 03/17/86

TAX RESOURCE CENTER (Firm/Company) 7 PM 3:23

121-97 PEMBROKE ROAD (Address)

PEMBROKE PINES FL. 33025 (City/State and Zip code)

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DIVISION OF CORPORATIONS

For further information concerning this matter, please call:

FRAZER JOHNSON at (954) 430-5527  
(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



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

March 25, 2003

FRAZIER JOHNSON  
TAX RESOURCE CENTER  
121-97 PEMBROKE ROAD  
PEMBROKE PINES, FL 33025

SUBJECT: E JAM IT SOLUTIONS, INC.  
Ref. Number: W03000008486

We have received your document for E JAM IT SOLUTIONS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers  
Document Specialist

Letter Number: 903A00018107

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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. EJAM IT Solutions, 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. Georgia 3. 58-2465082  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 05/1999 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 817.155, F.S.)

7. 1515 NW 167<sup>th</sup> Street, Suite 224, Miami, FL 33169  
(Principal office address)

1515 NW 167<sup>th</sup> Street, Suite 224, Miami, FL 33169  
(Current mailing address)

8. Computer Solutions Provider - IBM Business Partner  
- HP Business Partner  
- AT&T Channel Partner  
(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)

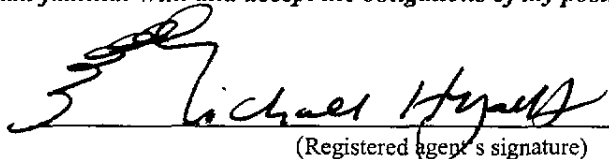
Name: Michael Hyatt

Office Address: 1515 NW 167<sup>th</sup> Street, Suite 224

Miami, Florida 33169  
(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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DIVISION OF CORPORATION  
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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Michael Hyatt

Address: 12124 ST. Andrew Place, Apt. 206  
MIRAMAR, FL 33025

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

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

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

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

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

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

B. OFFICERS

President: Michael Hyatt

Address: 12124 ST. Andrew Place, Apt. 206  
MIRAMAR, FL 33025

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

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

Secretary: MONICA HYATT-SILVERA

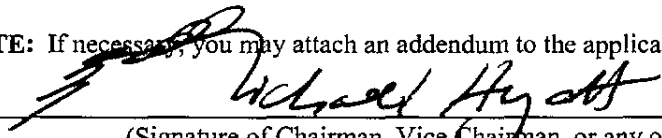
Address: 5797 Bobbin Lane, Lithonia, GA 30058

Treasurer: Elyabeth Haddon

Address: 12124 ST. Andrew Place, Apt 206, MIRAMAR, FL 33025

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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. MICHAEL DOUGLAS HYATT, President & CEO  
(Typed or printed name and capacity of person signing application)

**Secretary of State**  
**Corporations Division**  
**315 West Tower**  
**#2 Martin Luther King, Jr. Dr.**  
**Atlanta, Georgia 30334-1530**

DOCKET NUMBER : 030871017  
CONTROL NUMBER : K904125  
DATE INC/AUTH/FILED : 12/31/1998  
JURISDICTION : GEORGIA  
PRINT DATE : 03/28/2003  
FORM NUMBER : 211

EJAM IT SOLUTIONS, INC.  
MICHAEL HYATT  
1515 NW 167TH ST STE 224  
MIAMI N, FL 33169

**CERTIFICATE OF EXISTENCE**

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

**EJAM IT SOLUTIONS, INC.**  
**A DOMESTIC PROFIT CORPORATION**

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



*Cathy Cox*  
Cathy Cox  
Secretary of State

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DIVISION OF CORPORATIONS  
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