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03 INAY 28 AT 10: 05



Peare & Heller Financial Services CERTIFIED PUBLIC ACCOUNTANTS - BUSINESS ADVISORS

525 TOWN LINE ROAD • HAUPPAUGE, NEW YORK 11788

May 14, 2003

Florida Department of State P.O. Box 6327 Tallahassee, FL 32314 Attn: Ms. Marsha Thomas Document Specialist

Re: SCB ASSOCIATES, Ltd, Inc.

Ref# W03000012447

Dear Ms. Thomas:

We are the accountants for the above-reference company. Enclosed is a copy of your letter dated May 1, 2003 charging penalties in the amount of \$1,150 for conducting business in the State of Florida before being qualified to do so.

My client called the Department of State to get qualification prior to doing business in the State of Florida. My client's business name is SCB Associates, Ltd. When he called the Department of Revenue, his company name was confused with a company named S.C.B, Associates, Inc., which was dissolved on February 16, 1979. At that time, my client was unaware he was being confused with another company. He was calling to find out the necessary procedure to do business in Florida. He was misinformed of the proper procedures by the Department of Revenue because of the similar business name.

Enclosed please find a copy of a letter sent to my client from the Department of State indicating that the Uniform Business Report was not needed as the company was dissolved. This letter clearly indicates that my client's company is being confused with another company.

Upon receipt of the copies of the correspondence between your office and our client, we contacted the Registration Department and spoke with "Joey". The information was sorted out and the Registration Department indicated that improper information was given to our client from the Department of Revenue. We were told the proper procedures to correct the misunderstanding and our client filed the necessary paperwork.



Peare & Heller Financial Services

Ms. Marsha Thomas May 14, 2003 Page 2

We respectfully request that the penalties be abated due to the misunderstanding between my client and the personnel at the Department of Revenue.

Very truly yours,

Stanley M. Heller, CPA

Enclosure SMH/Jm

03 MAY 28 AM IO: 05



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 1, 2003

STANLEY C. BIRKEN 7438 VIALE ANGELO DELRAY BEACH, FL 33446

SUBJECT: SCB ASSOCIATES LTD INC

Ref. Number: W03000012447

03 MAY 28 AN 10: 05

We have received your document for SCB ASSOCIATES LTD 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:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1150.00.

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) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 503A00026631

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: 5 BASSOCIATES 47D //(Name of corporation - must include suffix)
(Name of corporation - must include surfix)
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:
STANLEY C BIRKEN ES
SCB ASSOCIATES LTD INC.
7438 VIALE ANGELO (Address)
(Address) DELRAY BEACH FL 33446 (City/State and Zip code)
For further information concerning this matter, please call:
(Name of Person) at (56/) 6378809 (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 \$\sigma\$ \$78.75 Filing Fee & \$\sigma\$ \$78.75 Filing Fee & Certificate of Status \$\sigma\$ Certified Copy \$\sigma\$ 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. SCB ASSOCIATES TO ALC

(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. NEW VORK STATE 3. (FEI number, if applicable)

4. Q1 Q Q (State or country under the law of which it is incorporated)

(Date of incorporation)

5. (Duration: Year corp. will cease to exist or "perpetual")

6. (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. Y 3. S. VALE ALCELO DELPHY BENCH FL 33 4 46

(Principal office address)

SAME AS ABOVE 5. S.

(Current mailing address)

8. (Current mailing address)

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

Name: STANCEY BIRKEN

Office Address: 7 4 3. SVALE ANGETO

(City) BEACH, Florida 3 3 4 44

(City) 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: STANLEY C. BIRKEN	
Address: 7438 VIALE ANGELO	
DELRAY BEACH, EL 33446	
Vice Chairman:	 -
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
resident: STANLEY C BIRKEN	
Address: 7438 VIALE ANGELO	
PELRAY BEACH FL 33446	
,	
rice President:	
ddress:	
ecretary: BERNICE GIRKEN	
ddress: SAME AS ABOVE	
reasurer:	
ddress:	
OTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
3	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
4. STANCEY CIBIRKEN, PRESIDENT	
(Typed or printed name and capacity of person signing application)	

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of SCB ASSOCIATES, LTD. was filed on 02/02/1999, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 22nd day of April two thousand and three.

Secretary of State

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