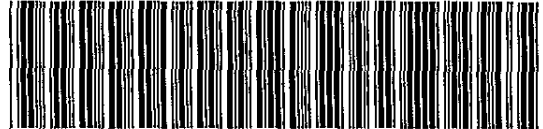


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STATE
TALLAHASSEE, FLORIDA



700024445717

11/06/03--01043--003 **87.50

(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:

AL

Office Use Only

PREMIER CORPORATE SERVICES, INC.

208 South LaSalle Street, Suite 1855
Chicago, IL 60604
(312) 346-3606 (800) 934-2556
Fax: (312) 346-3607

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ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

October 31, 2003

VIA Regular Mail

Division Of Corporations
Florida Department Of State
409 E. Gaines Street
Tallahassee, FL 32399

Re: Information Network Associates, Inc.

Dear Sir or Madam:

On behalf of the above captioned foreign corporation, enclosed are the appropriate forms to register the company, along with our check in payment of the filing fees and the certification from the home state.

Please file with your office and return the duplicate copy, file stamped, as evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,



Tony Alexander

TA/smc.
Encl.

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

FILED

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. INFORMATION NETWORK ASSOCIATES, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. PENNSYLVANIA

(State or country under the law of which it is incorporated)

3. 23-2220525

(FEI number, if applicable)

4. 10/4/82

(Date of incorporation)

5. PERPETUAL

(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. 5235 No. FRONT ST. HARRISBURG, PA 17110

(Principal office address)

P.O. Box 60515, HARRISBURG, PA 17106-0515

(Current mailing address)

8. TO PROVIDE INVESTIGATIVE & SECURITY GUARD SERVICES

(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: NRAI SERVICES, INC.

Office Address: 526 E. PARK AVENUE

TALLAHASSEE

(City)

Florida 32301

(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)

ANTHONY J. ALEXANDER, ASST. SECRETARY

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

FILED

Chairman: BARRY W. RYAN

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Address: 1604 RED HILL RD.
DAUPHIN, PA 17018

SEAL OF THE STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: DANIEL P. RYAN

Address: 1605 GAP VIEW RD.
DAUPHIN, PA 17018

Vice President: _____

Address: _____

Secretary: MATTHEW F. RYAN

Address: 575 LUCINDA LANE, MECHANICSBURG, PA 17055

Treasurer: DANIEL P. RYAN

Address: 1605 GAP VIEW RD., DAUPHIN, PA 17018

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

13. Barry W. Ryan

(Signature of Director or Officer listed in number 12 of the application)

14. BARRY W. RYAN - CEO

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