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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FOREIGN PROFIT QUALIFICATION

ADMIRAL CRAFT EQUIPMENT CORP.

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|-----------------------|---------|
| Certificate of Status | 0 |
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11-17-03



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

November 14, 2003

CSC

SUBJECT: ADMIRAL CRAFT EQUIPMENT CORP.
REF: W03000033858*Resubmit*

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

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) 245-6025.

Trevor Brumley
Document SpecialistFAX Aud. #: H03000317031
Letter Number: 003A00061999

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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. ADMIRAL CRAFT EQUIPMENT CORP.

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

ADACRAFT EQUIPMENT CORP.

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

2. New York

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

3.

13-2560325

(FBI number, if applicable)

4. 4/13/1964

(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 607.155, F.S.)

7. 940 SOUTH OYSTER BAY ROAD, HICKSVILLE NY 11801

(Principal office address)

940 SOUTH OYSTER BAY ROAD HICKSVILLE NY 11801

(Current mailing address)

8. distribute Restaurant Supplies

(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: Corporation Service Company

Office Address: 1201 HAYS STREET

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.

Brian Courtney
Asst. V. Pres.

(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:

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A. DIRECTORS

Chairman: MATHEW LOBMAN
Address: 26 OVERLOOK DRIVE
LAUREL HOLLOW, NY 11791
Vice Chairman: _____
Address: _____
Director: _____
Address: _____
Director: _____
Address: _____

B. OFFICERS

President: MATHEW LOBMAN
Address: 26 OVERLOOK DRIVE
LAUREL HOLLOW, NY 11791
Vice President: ROBERT POWERS
Address: 36 4TH STREET
HICKSVILLE NEW YORK 11801
Secretary: _____
Address: _____
Treasurer/Controller: BASIL MINICKER
Address: 23 CARDINAL LANE
HAVANA NEW YORK 11788

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

13. 
(Signature of Director or Officer listed in number 12 of the application)
14. BASIL MINICKER
(Typed or printed name and capacity of person signing application)

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State of New York) ss:
Department of State

I hereby certify, that the Certificate of Incorporation of ADMIRAL CRAFT EQUIPMENT CORP. was filed on 04/15/1964, 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 15th day of October
two thousand and three.*

Secretary of State

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