# F04000001518

(Re	questor's Name)	<del>.</del>
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





000029890510

03/11/04--01043--001 \*\*70.00

AR 11 PM 3: 02

5/

### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: HORIZON DIRECT, INC.			
	on - must include suffix)		_
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to transact business in Florida.			)
Please return all correspondence concerning this matter	r to the following:		
ASTRID MACK			_
(Name o	f Person)		
ALT & ASSOCIATES		<del>- (1</del>	<u>۔</u>
(Firm/Co	ompany)	4 MAR	が行
18010 SKYPARK CIRCLE, SUITE 200		<del>5</del> 5 7	로슈 무로
•	ress)	(	CORC
IRVINE, CA 92614	177	<u> </u>	문 문 동
(City/State	and Zip code)	3: 02	ATIONS
For further information concerning this matter, please	call:		
ASTRID MACK at ( 949	756-5250		
(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 & □ \$87.50 Filing Certified Copy Certificate Certified C	of Statu	ıs &

# 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	DRIZON DIRECT, INC.
(Enter name of "Inc.," "Co.," "C	f corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  'Corp," "Inc," "Co," or "Corp.")
N/	/A
(If name unavai	ailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. CALIFOR	RNIA 3. 77-0469586
	ry under the law of which it is incorporated) (FEI number, if applicable)
4. 09/1999	9 PERPETUAL
(Dat	5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")
6. UPON Q	QUALIFICATION
· · · · · · · · · · · · · · · · · · ·	sacted 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.)
<sub>7.</sub> 850 HAM	MPSHIRE ROAD, SUITE S WESTLAKE VILLAGE, CA 91361
	(Principal office address)
850 нам	MPSHIRE ROAD, SUITE S WESTLAKE VILLAGE, CA 91361
	(Current mailing address)
8. RESIDEN	NTIAL MORTGAGE LENDING/BROKERING  (a) of correction sutherized in home state or country to be corried out in state of Florida (c)
(Purpose(	e(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and str	reet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name:	BUSINESS FILINGS INCORPORATED
Office Address:	1000 WEST AVENUE SUITE 1114
	MIAMI BEACH , Florida 33139
	(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 JOHN DAVIMOS Chairman: \_\_\_\_ 850 HAMPSHIRE ROAD, SUITE S Address: \_\_\_\_ WESTLAKE VILLAGE, CA 91361 Vice Chairman: \_\_\_\_\_ Address: \_ CODY SORENSON Director: \_\_\_\_ 850 HAMPSHIRE ROAD, SUITE S Address: \_\_\_\_ WESTLAKE VILLAGE, CA 91361 RANDY VAN DUECK Director: \_\_\_\_ 850 HAMPSHIRE ROAD, SUITE S Address: WESTLAKE VILLAGE, CA 91361 **B. OFFICERS** JOHN DAVIMOS President: 850 HAMPSHIRE ROAD, SUITE S WESTLAKE VILLAGE, CA 91361 Address: Vice President: CODY SORENSON Address: 850 HAMPSHIRE ROAD, SUITE S WESTLAKE VILLAGE, CA 91361 RANDY VAN DUECK Secretary: Address: 850 HAMPSHIRE ROAD, SUITE S WESTLAKE VILLAGE, CA 91361 Treasurer: \_\_\_ CODY SORENSON Address: SAME AS ABOVE NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) JOHN DAVIMOS

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



#### SECRETARY OF STATE

## **CERTIFICATE OF STATUS** DOMESTIC CORPORATION

I, KEVIN SHELLEY, Secretary of State of the State of California, hereby certify:

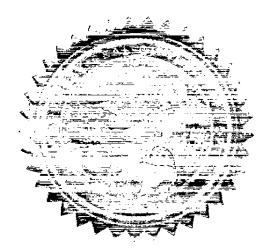
That on the 11th day of SEPTEMBER 1997, HORIZON DIRECT, INC. became incorporated under the laws of the State of California by filing its Articles প্রা Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of January 12, 2004.

> KEVIN SHELLEY Secretary of State

OSP 03 74700 🚘