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Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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1746 Kalorama Road NW || Washington, DC 20009 USA

August 31, 2004

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re: Registration of a Foreign Corporation to Transact Business in the State of Florida

To Whom It May Concern:

Please see attached our application for registering a foreign corporation to transact business in Florida.

Sincerely,

Pamela Wells Russell

Fintrac Inc.

04 SEP -3 PM 1:54

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	· · · · · · · · · · · · · · · · · · ·
SUBJECT: FINTRAC	INC.
	corporation - must include suffix)
Dear Sir or Madam:	
	oration for Authorization to Transact Business in Florida", mitted to register the above referenced foreign corporation to
Please return all correspondence concerning to CLAIRE STARKE	
FINTRAC TN	(Name of Person)
1746 KALORAMA	(Firm/Company) ROAD N.W.
WASHINGTON, D	(Address) . C. 20009
(C	City/State and Zip code)
For further information concerning this matter	r, please call:
PAMELA WELLS RUSSELL at (, 954 , 727 - 8189
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Enclosed is a check for the following amount:	<u>ũ</u> ∶
\$70.00 Filing Fee \$78.75 Filing Fee Certificate of Sta	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	NCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED 1 FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	\mathcal{O}
1 FIN	NTRAC INC.	
(Enter name of "Inc.," "Co.,"	of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," ""Corp," "Inc," "Co," or "Corp.")	
	available in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida	rida)
2. DESTRE	ntry under the law of which it is incorporated) 3. 52-1700302 (FEI number, if applicable)	
(State or country	ntry under the law of which it is incorporated) (FEI number, if applicable)	
4. <u>OCTO</u> I	BER 15, 1990 5. PERPETUAL	
· _	Date of incorporation) (Duration: Year corp. will cease to exist or "perpetu	al")
6. <u>A</u>	APRZC 5, 2004	
(Date first trans	insacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualificat (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	ion,")
7 950 3	SOUTH PINE ISLAND RO. PLANTATION FL 3:	3324
···	(Principal office address)	<u> </u>
SE	AME	
	(Current mailing address)	, ₌
8. REPR	RESENTATIONAL OFFICE TO SUPPORT PROJECTS IN (CENTRAL AMORIC
(Purpose(ose(s) of corporation authorized in home state or country to be carried out in state of Florida)	CARIBBE
9. Name and <u>str</u>	street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	CARIDS
Name:		
Office Address:	S: 950 SOUTH PINE ISLAND ROAD	
	PLANTATION ,Florida 33324 (City) (Zip code)	
	(City) (Zip code)	
Having been nan	d agent's acceptance: tamed as registered agent and to accept service of process for the above stated corporation at this capplication, I hereby accept the appointment as registered agent and agree to act in this capplication.	j Sa Greplace
further agree to c	to comply with the provisions of all statutes relative to the proper and complete performance of liar with and accept the obligations of my position as registered agent.	f my duties,
-	Russell] ;}
	(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:	 	<u>-</u>	h		
Address:			# + <u>-</u> -		
<u> </u>			· ·		
Vice Chairman:		•	-,,		
Address:					
			5 · · · · · · · · · · · · · · · · · · ·		·
	· · · · · · · · · · · · · · · · · · ·		* *		
Director:			·····		
Address:					· · · ·
				_	
Director:		· — — — — — — — — — — — — — — — — — — —	 		
Address:	=		<i>j</i> -		·
		= = =		<u>.</u>	
B. OFFICERS					
President:CLAIRE	STARKEY		<u>-</u>		<u> </u>
Address: 3834 Mc	KINLEY STRE	ET NW			
	GTON, DC 20	•			
and the second s	CLOTZBACH				
Address: 3834 me	CKINLEY STA	REET NW	•		
	STON. DC 20	•	TE VE	04 04	
Secretary:	., ., .,		,	50 C	
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Treasurer:	· · · · · · · · · · · · · · · · · · ·	 	· ·	- C	
Address:				- 2 - 22	
NOTE: If necessary, you may alter	h an addendum to the applica	ution listing additional	officers and/or di		
13.				1000015.	
	zor or Officer listed in number	12 of the application)		- <u></u>	
14. QLAZRE STAL		IDENT			
(Typed or p	rinted name and capacity of p	erson signing applicat	ion)		

GOVERNMENT OF THE DISTRICT OF COLUMBIA

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS



CERTIFICATE

THIS IS TO CERTIFY that there were received and accepted for record in the Department of Consumer and Regulatory Affairs, Corporations Division, on the 15th day of October, 1990 Articles of Incorporation of:

WE FURTHER CERTIFY that the above named corporation is in <u>Good Standing</u> and duly incorporated and existing according to the records of Corporations Division, having filed all reports as required by the District of Columbia Business Corporation Act.

IN TESTIMONY WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed this 19th day of August, 2004.

David Clark DIRECTOR

Winnie R. Huston
Acting Administrator
Business and Professional Licensing Administration

Patricia E. Grays

Superintendent of Corporations

Corporations Division

FINTRAC, INC.