

BLUMBERGEXCELSIOR

Fax:888-692-9256

Oct 5 2004 11:50

P.01

Page 1 of 1

**F-04000005681****Electronic Filing Cover Sheet**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

**(((H04000198468 3)))**

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

**To:**

Division of Corporations  
Fax Number : (850) 205-0323

**From:**

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 07535000353  
Phone : (212) 431-3000  
Fax Number : (212) 431-1441

**FOREIGN PROFIT QUALIFICATION****FUNDS SERVICE BUREAU INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

**Electronic Filing Menu****Corporate Filing****Public Access Help**

8450-05-10070

BLUMBERGEXCELSIOR  
NOV40001955405 3

Fax: 888-692-9256

Oct 5 2004 11:50

P.02

**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. FUNDS SERVICE BUREAU 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. NEW YORK**

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

**3. 11-2708671**

(FEI number, if applicable)

**4. MARCH 31, 1988**

(Date of incorporation)

**5. PERPETUAL**

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

**6.**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

**7. 1212 OCEAN DUNES CIRCLE, JUPITER, FLORIDA 33477**

(Principal office address)

1212 OCEAN DUNES CIRCLE, JUPITER, FLORIDA 33477

(Current mailing address)

**8. INSURANCE CONSULTING**

(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 NOT acceptable)**

Name: MARIA LAMONTE

Office Address: 1212 OCEAN DUNES CIRCLE

JUPITER

(City)

Florida 33477

(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.*

Maria Lamonte

(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:

BLUMBERGEXCELSIOR

Fax:888-692-9256

Oct 5 2004 11:51

P.03

**A. DIRECTORS**Chairman: MARIA LAMONTEAddress: 1212 OCEAN DUNES CIRCLE  
JUPITER, FLORIDA 33477Vice Chairman: JOSEPH LAMONTEAddress: 1212 OCEAN DUNES CIRCLE  
JUPITER, FLORIDA 33477Director: MARIA LAMONTEAddress: 1212 OCEAN DUNES CIRCLE  
JUPITER, FLORIDA 33477Director: JOSEPH LAMONTEAddress: 1212 OCEAN DUNES CIRCLE  
JUPITER, FLORIDA 33477**B. OFFICERS**President: MARIA LAMONTEAddress: 1212 OCEAN DUNES CIRCLE  
JUPITER, FLORIDA 33477Vice President: JOSEPH LAMONTEAddress: 1212 OCEAN DUNES CIRCLE  
JUPITER, FLORIDA 33477Secretary: JOSEPH LAMONTEAddress: 1212 OCEAN DUNES CIRCLETreasurer: JUPITER, FLORIDA 33477

Address: \_\_\_\_\_

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. MARIA LAMONTE, PRESIDENT  
(Typed or printed name and capacity of person signing application)

BLUMBERGEXCELSIOR

Fax:888-692-9256

Oct 5 2004 11:51

P.04

# State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of FUNDS SERVICE BUREAU INC. was filed on 03/31/1986, 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.

The Biennial Statement is past due.

I further certify, that no other documents have been filed by such Corporation.



\*\*\*

Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 28th day of September  
two thousand and four.

Secretary of State