

JAN-21-2005 12:40
Division of Corporations

CT CORPORATION

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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
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DIVISION OF CORPORATION

FOREIGN PROFIT QUALIFICATION

CML Emergency Services, Inc

| | |
|-----------------------|-----------------------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$1,220.00 |

70.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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. CML EMERGENCY SERVICES, 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. DELAWARE

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

3. 54-1958733

(FEI number, if applicable)

4. SEPTEMBER 27, 1999

(Date of incorporation)

5. PERPETUAL

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

6. NOVEMBER 17, 2004

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

7. 75 BOUL. DE LA TECHNOLOGIE, GATINEAU, QC J8Z 3G4

(Principal office address)

SAME AS IN 7 ABOVE

(Current mailing address)

8. Sales and Service of hardware and software used in 9-1-1 call management
(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: CT CORPORATION SYSTEM

Office Address: 1200 SOUTH PINE ISLAND ROAD

PLANTATION

(City)

Florida 33324

(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.

Anthony J. [Signature] Asst. Secretary
(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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ALLAHSEE, FLORIDA

A. DIRECTORSChairman: LEE HAMILTONAddress: 11800 31st COURT NORTHST. PETERSBURG, FL 33716-1805Vice Chairman: GREGORY CASEAddress: 445 PARK AVENUE 11th FLOORNEW YORK, NY 10022Director: STEVE PANYKOAddress: 75 BOUL. DE LA TECHNOLOGIEGATINEAU, QC J8Z 3G4Director: DAVID JEFFREYAddress: 75 BOUL. DE LA TECHNOLOGIEGATINEAU, QC J8Z 3G4**B. OFFICERS**President: STEVE PANYKOAddress: 75 BOUL. DE LA TECHNOLOGIEGATINEAU, QC J8Z 3G4Vice President: DAVID JEFFREYAddress: 75 BOUL. DE LA TECHNOLOGIEGATINEAU, QC J8Z 3G4Secretary: DAVID JEFFREYAddress: 75 BOUL. DE LA TECHNOLOGIE, GATINEAU, QC

Treasurer: _____

Address: _____

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

13. David Jeffrey
(Signature of Director or Officer listed in number 12 of the application)14. DAVID JEFFREY, VICE-PRESIDENT & SECRETARY
(Typed or printed name and capacity of person signing application)FILED
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TALLAHASSEE, FLORIDA

Delaware

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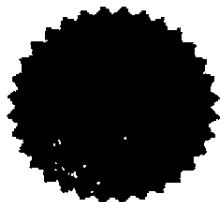
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CML EMERGENCY SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF JANUARY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3102440 8300

AUTHENTICATION: 3627123

050045933

DATE: 01-19-05

TOTAL P.04