F05000002954

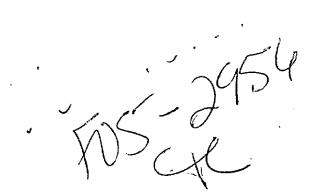
(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(assumed Line)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





600047837536

600047837536 03/22/05--01054--005 **70.00



May 16, 2005

TO TAMMI CLINE
Document Specialist
Division of Corporations
P.O Box 6327
Tallahassee, Florida 32314

I sent a check of \$70 to register a corporation in Florida (we talked on the phone) it was Safe Juice and Foods.....a GOOD STANDING CERTIFICATE WAS REQUIRED BY YOU AND WE CHANGED THE NAME OF THE CORPORATION TO

"CLASSROOM CONTROL" IN DELAWARE AND WANT TO REGISTER "CLASSROOM CONTROL" IN FLORIDA. Please register CLASSROOM CONTROL in Florida.

Michael Fisher

Corporate Official

From
Michael Fisher
1420 Ocean Way #30B
Supter, Florid 33477



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 16, 2005

CLASSROOM CONTROL COMPANY 1420 OCEAN WAY 30B JUPITER, FL 33477

We have received your document for CLASSROOM CONTROL COMPANY and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 205A00035052



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 24, 2005

MICHAEL FISHER 1420 OCEAN WAY 30B JUPITER, FL 33477

SUBJECT: SAFE JUICE & FOOD INCORPORATED

Ref. Number: W05000015149

We have received your document for SAFE JUICE & FOOD INCORPORATED and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 305A00020325

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Classroom, Control Conpany
(Name of corporation - must include suffix)
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Michael Fisher
(Name of Person)
Safe Juice and Food Inc.
(Firm/Company)
1420 Ocean Way 30B
(Address)
Jupiter, Florida 33477
(City/State and Zip code)
For further information concerning this matter, please call:
Michael Fisher at (561) 745-8710
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations
409 E. Gaines St. P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$75.75 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status & Certified Copy Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

			TATUTES, THE FOLLOWING IS SUBMI BUSINESS IN THE STATE OF FLORIDA		
1. Cassiliani (Enter name of confirmation) "Co.," "	orporation; must include "INCORPORATION," "Inc," "Co," or "Corp.")		" "COMPANY," "CORPORATION,"		
Classroom Co					
(If name unavail	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting busine	ss in Florida)	
2. Delaware		3.	65-0871258		
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)	₹	
4. May 5, 1998		5.	; "perpetual"		
(Date of incorporation)			(Duration: Year corp. will cease to exist or	"perpetual")	
6. Has not starte					
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)	·	
- 1420 Ocean We	ay #30B , Jupiter, Florida 33477		•,		
7. 1420 Octan W	(Principal office:	add	ress)		
1420 Ocean Wi	ay #30B Jupiter, Florida 33477		,		
1-120 Octan 111	(Current mailing	add	ress)		
	,		·		
8. Research					
(Purpose(s) of corporation authorized in home state of	rco	ountry to be carried out in state of Florida)		
9. Name and stree	t address of Florida registered agent: (P.C), Box NOT acceptable)	SECRETARY OF SURT	
Name:	Michael Fisher			922	
Office Address:	1420 Ocean Way 30B		The state of the s	75 5	
			00.477	98 9	
	Jupiter, Florida (City)		, Florida 33477 (Zip code)	۱۳۰۱) د من	
	(City)		(zip code)		
Having been nam designated in this further agree to c	application, I hereby accept the appoin	intn es r	ce of process for the above stated corpor nent as registered agent and agree to act elative to the proper and complete perfor sition as registered agent.	in this capacity. I	
	(Registered agent's signatu	ıre)			

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: Mchautishor
Address: 1420 0 cm WAY 305
July 21 32477
Vice Chairman: Mile 714 ESW
Vice Chairman: NW714 F. W
Address: 1720 CM WAT H 703
- 1) (Nota + 1 3747 +
Director:
Address:
Director:
Address:
B. OFFICERS
President: Wil Civil 1:5 h
Address: 1420 Ocen Way 17303
5, No to 57 32477
Vice President: NWY VP FSW
1412000 001167 + 2013
Address:
Manula Tish
Secretary:
Address: 1400000 120 120 120 120 120 120 120 120 12
Treasurer: Mechal ISC
Address: 1420 Ocenn Wy Just E 33427
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. Michaeltism
(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CLASSROOM CONTROL CORP." 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 NINTH DAY OF MAY, A.D. 2005.



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 3865336

DATE: 05-09-05

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