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& BRYAN JUL 2 1 2005

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: <u>Fastern Builders Inc.</u> (Name of corporation - mu	Us la Ams Northeast ust include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Autho "Certificate of Existence," and check are submitted to register transact business in Florida.	
Please return all correspondence concerning this matter to the	
(Name of Perso	n)
Eastern Bulders, Inc. D/B/A + (Firm/Company)	y)
3663 Lee ROAD #509	2005 ·
(Address)	E T
Jetterson Valley, NY 12535 (City/State and Zij	HASSI 18
(City/State and Zij	
For further information concerning this matter, please call:	FLORI
	DAY OAK
Linea Thompson at (914) 4	
(Name of Person) (Area Code &	& Daytime Telephone Number)
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations 409 E. Gaines St.	Division of Corporations P.O. Box 6327
Tallahassee, FL 32399	Tallahassee, FL 32314
Enclosed is a check for the following amount:	
	75 Filing Fee & S87.50 Filing Fee, ified Copy Certificate of Status & Certified Copy

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	Eastern Builders Inc.				
••	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"				
	"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")				
	Eastern Merchant Services				
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)				
2.	(State or country under the law of which it is incorporated) 3. 13-413 4901 (FEI number, if applicable)				
4.	September 14 2000 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")				
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")				
6.	(Date first transacted business in Florida, if prior to registration)				
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)				
7.	7. 120 E. Pine Street Suite #4 Lakelans, Fl. 33803 (Principal office address)				
(Principal office address)					
	3663 Lee Road #509 Jefferson Valley, MY 10535 (Current mailing address)				
	(Current mailing address)				
8. Sales Service Merchant Services					
υ,	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)				
_					
9.	Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)				
	Name: Linka Thompson				
	Natile. <u>FIABLE TRUMPSON</u>				
Of	fice Address: 120 R. Pine Street Suitety				
	,				
	Lakeland, Florida Rogo3				
	(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	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	` _
Address:	
6 2 2 C	
Director:	
Address:	
B. OFFICERS	
President: Linsa Thompson	
Address: 5665 Lee Moad 7509	
Jefferseg Valley, NY 10547	
Vice President:	
Address:	
Secretary: Ling Thompson	
Address: 3663 Lee Roan #509 Setterson Valley, MY 10535 Treasurer: Lind Thompson Address: 3663 Lee Roan #509 Setterson Valley MY 10535	
Treasurer: Liaba Thomason	
Address: 3663 Lee ROAD #509 Jefferson Valley My 10535	
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. (Typed or printed name and capacity of person signing application)	

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of EASTERN BUILDERS, INC. was filed on 09/14/2000, 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 an existing corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 21st day of June two thousand and five.

Secretary of State

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