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TRANSMITTAL LETTER

	tration Section ion of Corporati	ons		
SUBJECT:	P.P.P.C. INVE	SCO INC.		
			ration - must include suffix)	
Dear Sir or M	adam:			
"Certificate o			for Authorization to Transa to register the above refere	
Please return	all corresponder	ce concerning this m	atter to the following:	
VINCENT AL	LARD			c3
		(Nan	ne of Person)	
CORPOMAX	INC.			
		(Firm	/Company)	22 7
PO BOX 926	6			JUS JUL 28 PH 12: 05
		(/	Address)	70.5
NEWARK, DE	E 19714-9266			
· · · · · · · · · · · · · · · · · · ·		(City/St	ate and Zip code)	
For further in	formation conce	rning this matter, plea	ase call:	··
VINCENT ALI	LARD	at (302	₃ 266-8200	
(Nan	ne of Person)		rea Code & Daytime Teleph	ione Number)
Regis Divis 409 E Tallal	EET ADDRESS tration Section ion of Corporati . Gaines St. hassee, FL 3239 check for the following the section of the following the section of	ons 9	MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7
⊐ \$70.00 Fili	_	78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, 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.

(Enter name of a	corporation; must include "INCORPORATE	ED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "C	Corp," "Inc," "Co," or "Corp.")	
(If name unavai	lable in Florida, enter alternate corporate na	me adopted for the purpose of transacting business in Florida)
2. DELAWARE		3. 98-0458356
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
4. MAY 27, 2005	<u> </u>	5. PERPETUAL
(Date	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6		
		is in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)
7. 5820 W. IRLO	BRONSON MEMORIAL HWY, #1243, K	
	(Principal office a	
5820 W. IRLO	BRONSON MEMORIAL HWY, #1243, H	
	(Current mailing a	address)
8. DISTRIBUTIO	N AND SALE OF INNOVATIVE PRODU	octs On the Control of the Control o
	s) of corporation authorized in home state of	country to be carried out in state of Florida)
9. Name and stree	et address of Florida registered agent: (2	P.O. Box NOT acceptable)
Name:	PIERRE PICHE	
Office Address:	5820 W. IRLO BRONSON MEMORIA	AL HWY, #1243
	KISSIMMEE	, Florida 34746
	(City)	(Zip code)
10. Registered a	gent's acceptance:	
Having been nan	ned as registered agent and to accept se	rvice of process for the above stated corporation at the place
		ntment as registered agent and agree to act in this capacity. I s relative to the proper and complete performance of my dutie.
	r with and accept the obligations of my	
	\cap	
	() (),.	
_	(Registered agent's signatu	
	(vekisieren allent 2 sikuatu	16)

- 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:

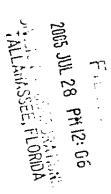
A. DIRECTORS
Chairman: PIERRE PAUL BILLARD
Address: 21 DEMONTIGNY
GATINEAU QC J8Y 4L4, CANADA
Vice Chairman: N/A
Address:
Director: PIERRE PICHE
Address: 5820 W. IRLO BRONSON MEMORIAL HWY, #1243
KISSIMMEE, FL 34746
Director: CLAUDE LAJOIE
Address: 21 DEMONTIGNY
GATINEAU QC J8Y 4L4, CANADA
B. OFFICERS
President: PIERRE PAUL BILLARD
Address: 21 DEMONTIGNY
GATINEAU QC J8Y 4L4, CANADA
Vice President: N/A
Address:
Secretary: PIERRE PICHE
Address: 5820 W. IRLO BRONSON MEMORIAL HWY, #1243, KISSIMMEE, FL 34746
Treasurer: CLAUDE LAJOIE
Address: 21 DEMONTIGNY, GATINEAU QC J8Y 4L4, CANADA
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. PIERRE PICHE, SECRETARY (Typed or printed name and capacity of person signing application)

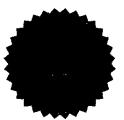
Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "P.P.P.C. INVESCO 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 TWENTY-SEVENTH DAY OF MAY, A.D. 2005.





Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 3912776

DATE: 05-27-05

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