

To: FL Dept. of State
Subject: 000150.45089

From: Trans Spea... Wednesday, December 7, 2005 3:00 PM Page: 1 of 5

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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 : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850)222-1173
Fax Number : (850)224-1640

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FOREIGN PROFIT QUALIFICATION

SHIPEIRON, INC

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To: FI Dept. of State
Subject: 000150.45089

From: Tracy Spear

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850-205-0381 12/7/2005 9:06 PAGE 001/001 Florida Dept of State

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December 7, 2005

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORPDIRECT AGENTS, INC.

SUBJECT: SHEPROON, INC.
REF: W05000053919

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE.

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

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) 245-6043.

Joey Bryan
Document Specialist

FAX Aud. #: H05000279233
Letter Number: 005A00070726

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DIVISION OF CORPORATION

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P.O BOX 6327 - Tallahassee, Florida 32314

2005 DEC -6 AM 10:56
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. SHEPROON, 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 3. Applied For
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 06/21/2005 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 555 Wilson Avenue, Toronto, Ontario M3H 5Y6
(Principal office address)

555 Wilson Avenue, Toronto, Ontario M3H 5Y6
(Current mailing address)

8. 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: CorpDirect Agents, Inc.

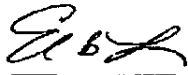
Office Address: 515 E. Park Avenue

Tallahassee, Florida 32301
(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.

By:


(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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A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Thomas Sheppard

Address: 488 Huron St.

Toronto, Ontario M5R 2R3

Director: Peter Rooney

Address: 376 Kennedy St. West

Aurora, Ontario L4G 5M6

2005 DEC -6 AM 10:56
ALLIANCE SELE. FLORIDA

B. OFFICERS

President: Thomas Sheppard

Address: 488 Huron St.

Toronto, Ontario M5R 2R3

Vice President: _____

Address: _____

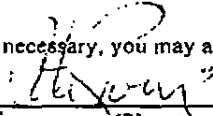
Secretary: Peter Rooney

Address: 376 Kennedy St. West, Aurora, Ontario L4G 5M6

Treasurer: Peter Rooney

Address: 376 Kennedy St. West, Aurora, Ontario L4G 5M6

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. PETER ROONEY, SECRETARY TREASURER
(Typed or printed name and capacity of person signing application)

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Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SHEPROON, 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 SIXTH DAY OF DECEMBER, A.D. 2005.

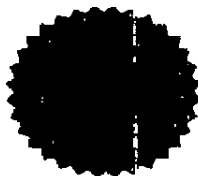
AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SHEPROON, INC." WAS INCORPORATED ON THE TWENTY-FIRST DAY OF JUNE, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED
2005 DEC -6 AM 10:56
DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA

3989025 8300

050989435



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4345718

DATE: 12-06-05
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