F05000007274

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M. HODGES

12/08/05--01022--008 **78.75

COVER LETTER

TO: Registration Sect Division of Corpo				
SUBJECT: POYON	mount Disast	er Recovery, h	nc.	
		ration - must include suffix)		
Dear Sir or Madam:				
	and check are submitted	for Authorization to Transa to register the above referen		
Please return all correspon	ndence concerning this ma	tter to the following:		
Hext	Semono:			
	(Nam	e of Person)		
<u>Parar</u>	nount pisas	er Rocovery, V	nc.	
		/Company)		
<u> </u>				
Man V		address)		
MIDS Y	evaes, ca 90%	ate and Zip code)		
	(Chy/Su	ue and Zip code)		
For further information co	oncerning this matter, pleas	se call:		
Jonda Paul	at (310	, aug-8046	2	
(Name of Person		ea Code & Daytime Teleph	one Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		Registration S Division of Co P.O. Box 632	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the				
	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy	



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 14, 2005

STEVE SLEPCEVIC PARAMOUNT DISASTER RECOVERY, INC. 27520 HAWTHORNE BLVD., STE 176 PALOS VERDES, CA 90274

SUBJECT: PARAMOUNT DISASTER RECOVERY, INC.

Ref. Number: W05000054997

We have received your document for PARAMOUNT DISASTER RECOVERY, INC. and your check(s) totaling \$78.75. 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 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) 245-6967.

Letter Number: 805A00071849

Michelle Hodges Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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. Paramount Disaster recovery, Inc.
(Enter name of corporation; must include "INCORPORATED," *COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
Davamant
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. <u>California</u> 3. 74-3037398
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 3/29/2002. 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 27520 Hawkhorne Blyd, Stellie, Palos Verdes, CA 90274 (Principal office address)
at 500 Hawthorne Blyd, ste 176, Palos Verdes, CA 90074 (Current mailing address)
8. Independent public insurance adjuster. (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: WINIAM D. CWAVIS
Office Address: 909 BMC Spring'S Rd.
Pan Sa Cola FL , Florida 32505
(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: Vice Chairman: Address: __ Director: _ Address: _ Director: _ Address: ____ B. OFFICERS Vice President: MI Address: 400 Cl Secretary: Address: _ Address: _ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) (Typed or printed name and capacity of person signing application)

State of California Secretary of State

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BRUCE McPHERSON, Secretary of State of the State of California, hereby certify:

That on the 29TH day of MARCH, 2002, PARAMOUNT DISASTER RECOVERY, INC. became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of September 28, 2005.



BRUCE McPHERSON
Secretary of State