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

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Mastervolt, Inc.			
	ration - must include suffix)		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation "Certificate of Existence," and check are submitted transact business in Florida.	for Authorization to Transact Business in Florida," I to register the above referenced foreign corporation to		
Please return all correspondence concerning this m	atter to the following:		
Leo J. Van Hemert			
(Nan	ne of Person)		
Mastervolt, Inc.			
(Firm	n/Company)		
P.O. Box 28626			
	Address)		
Baltimore, MD 21240			
(City/S	tate and Zip code)		
For further information concerning this matter, plea	ase call:		
Michael Small 290-0770 x110			
(Name of Person) (A	10) 290-0770 x110 rea Code & Daytime Telephone Number)		
	•		
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the following amount:			
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certified Copy 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.	Mastervolt,	Inc.	•		
(Enter name of co Inc.," "Co.," "Co	rporation; must include "INCORPORATED, rp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"		
(If name unavaila	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)		
2.	Maryland	3.	20-5736401		
(5	State or country u	nder the law of which it is incorporated)	(FEI number, if applicable)		
4	October 11	, 2006	Perpetual		
		of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")		
6.	November	1, 2006			
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)					
7 3211 South Andrews Avenue, Fort Lauderdale FL 33316					
(Principal office address)					
5	same				
(Current mailing address)					
8.	Sales of po	wer electronics.			
(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: Corporation Service Company				
Office Address: 1201 Hays Street					
		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.

Sue G. Knight as its agent

(Registered agent's kienature)

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.

SECRETARY OF STATE DIVISION OF CORPORATIONS

12. Names and business addresses of officers and/or directors:

A. DIRECTORS	06 DEC -4 AM 9: 01
Chairman: none	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS President: Paul F. Kenninck	
Address: 7380 Coca Cola Drive-Suite 112-113, Pata	osco Valley Business Center
Hanover, MD 21076	
Vice President: Leo J. Van Hemert	
Address: 7380 Coca Cola Drive-Suite 112-113, Pata	psco Valley Business Center
Hanover, MD 21076	
Sccretary: Leo J. Van Hemert	
Address:	
Treasurer: Leo J. Van Hemert	
Address:	
NOTE: If necessary, you may attach an addendum to the application	,
13. (Signature of Director or Officer listed in number	
Leo J. Van Hemert	1 12 of the application)

(Typed or printed name and capacity of person signing application)

STATE OF MARYLAND DIVISION OF CORPORATIONS Department of Assessments and Taxation -4 AM 9:01

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT MASTERVOLT, INC. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS OCTOBER 26, 2006.

Paul B. Anderson Charter Division



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097