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DIVISION OF CORPORATIONS
TALL AHASSEF, FLORIDA

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EXAMINER

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STA REGISTER A FOREIGN CORPORATION TO TRANSACT BE	USINESS IN THE STATE OF FLORIDA.
1. Northern Oceanic Research	h a Technology Holdings, Ltd. "COMPANY," "CORPORATION." T'nc
(Enter name of corporation; must include "INCORPORATED," "Inc.," "Co.," "Corp." "Inc.," "Co," or "Corp.")	"COMPANY," "CORPORATION," In C.
(If name unavailable in Florida, enter alternate corporate name a	
2. The Common wealth of the Bahamas 3. (State or country under the law of which it is incorporated)	COO V (Labo)
4. <u>Dec., 2006</u> 5. (Date of incorporation)	(Buration: Year corp. will cesse to exist or "perpetual")
6. The company has not transacted	business in Florida to date to the
(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150	business in Florida to date to the Florida, if prior to registration) Undersigned's knowledge. 12, F.S., to determine penalty liability)
7. 1545 Pelican Lane Vero (Principal office address	
(Principal Office address	1889) Ranch F1 32963
1545 Pelican Lane Vero (Current mailing adde	Bench, 10 30703
8. UNDERWATER EXPLORA (Purpose(s) of corporation authorized in home state or cou	untry to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O.	Box NOT acceptable)
Name: Dr. Eugene Lyon	AH)
Name: Dr. Eugene Lyon Office Address: 1545 Pelican Lane Vero Beach (City)	Box NOT acceptable) ALLAHASSEE, FLORI (Zip code)
Vero Beach	
(City)	(Zip code)
10. Registered agent's acceptance:	A S
Having been named as registered agent and to accept terrico designated in this application, I hereby accept the appointment	e of process for the above stated corporation at the place ent as revisiered agent and geree to act in this capacity. I
further agree to comply with the provisions of all staintes re- and I am familiar with and accept the obligations of my posi-	lative to the proper and complete performance of my duties,
and a uniformed was and accept the outgations of my post	mon an regiment a matrix
(Registered agent's signature)	
(Registered agent's signature)	

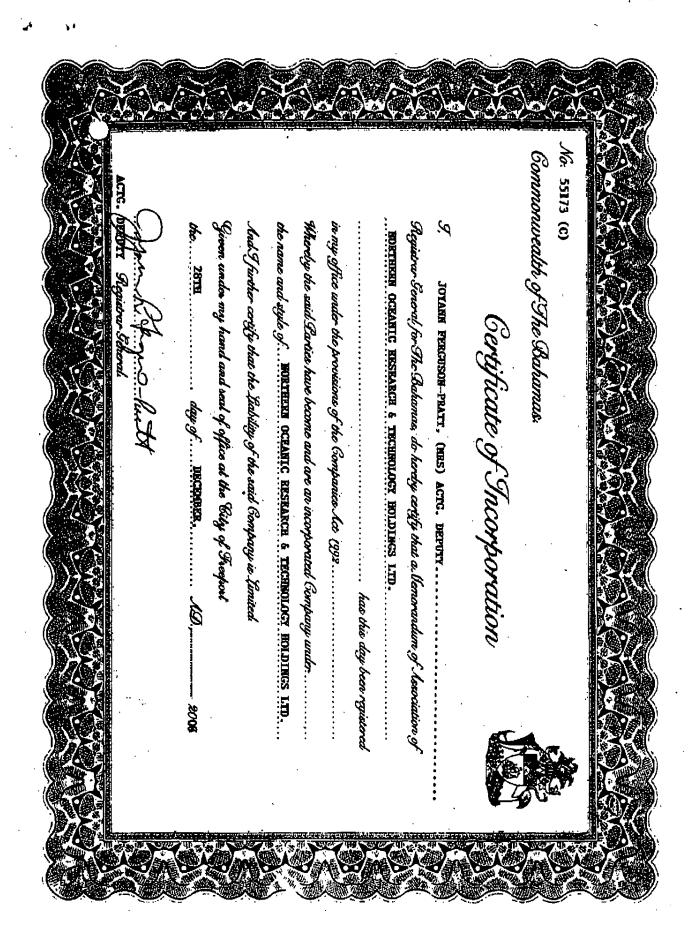
^{11.} Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and business addresses of officers and/or disortion:
A. DERECTORS
GORDON RICHARDEDN
MANNE 12 DOLLISH RE, HOLGONE ON DA, ESSEX COLGO-NA UN
Vice Chairmen:
Address:
Disease:
Address:
Disestor:
Address:
L OFFICERS
Gordon Richardson
12 DULKICH RD., HOLEAND DA SER ESSEX CO155 MA
Min 12 DULKICH RD., HOLLAND ON STA ESSEX (0155 NA (
Year President:
Africa:
larisy:
Address:
Gene Lyon
1545 Pelican Lane, Vero Beach, FL 32963
NOTE: Mesonery, you may attach an additiona to the application listing additional officers and/or discusses.
(Signature of Director or Officer listed in acceptor 12 of the application)
(Typed as estimated manne and connective of common circular manifestical)



Commonwealth of the Baharnas Registrar General's Department I CERTIFY the foregoing to be a true copy from record book pages to Acha Deput Registrar femina

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