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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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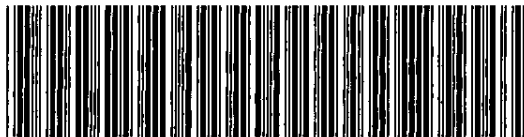
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2009 JAN 16 PM 1:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers JAN 20 2009

W08-57068  
647

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** CANADIAN TECHNOLOGY, INC.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

L. SMEJDA

(Name of Person)

SMEJDA & ASSOCIATES, P.A.

(Firm/Company)

100 SE 2ND STREET # 2222

(Address)

MIAMI, FL 33131

(City/State and Zip code)

For further information concerning this matter, please call:

L. SMEJDA

(Name of Person)

at ( 305 ) 3589995

(Area 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    ☒ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**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. **CANADIAN TECHNOLOGY, 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. **WYOMING**

(State or country under the law of which it is incorporated)

3. **90-0154780**

(FEI number, if applicable)

4. **12/16/2003**

(Date of incorporation)

5. \_\_\_\_\_

(Duration: Year corp. will cease to exist or "perpetual")

6. **JANUARY 3, 2008**

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

7. **2710 THOMES AVENUE, CHEYENNE, WY 82001**

(Principal office address)

**444 BRICKELL AVENUE # 51-246, MIAMI, FL 33131**

(Current mailing address)

8. **BUSINESS SERVICES, CONSULTING & INVESTMENTS**

(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: **CYBEREX, INC**

Office Address: **150 SE 2ND AVENUE, SUITE # 1004**

**MIAMI**

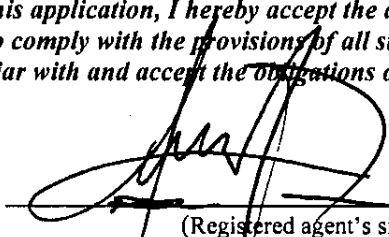
(City)

, Florida **33131**

(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.

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TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: A. ALEXANDER

Address: 2710 THOMES AVENUE, CHEYENNE, WY 82001

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: A. ALEXANDER

Address: 2710 THOMES AVENUE, CHEYENNE, WY 82001

Vice President: G. FRANCO

Address: 2710 THOMES AVENUE, CHEYENNE, WY 82001

Secretary: A. ALEXANDER

Address: 2710 THOMES AVENUE, CHEYENNE, WY 82001

Treasurer: A. ALEXANDER

Address: 2710 THOMES AVENUE, CHEYENNE, WY 82001

**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. A. ALEXANDER

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

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2009 JAN 16 PM 1:52  
TALLAHASSEE, FLORIDA

# State of Wyoming

## Office of the Secretary of State



United States of America,  
State of Wyoming } ss.

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

**Canadian Technology, Inc.**  
is a  
**Profit Corporation**

formed or qualified under the laws of Wyoming did on **December 16, 2003**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2003-000459067**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 10th day of December, 2008 at 2:15 PM.



*Max Maxfield*  
Secretary of State

By *Clay Kline*