

07/23/2010

File 00000000 3332

AGENT

01/07

<https://efile.sumbiz.org/scripts/efilecovr.1>

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE.

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE.

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H10000166323 3)))



H100001663233ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850) 617-6381

001868.129093

From:

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

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 JUL 21 PM 2:00

FILED

FLORIDA PROFIT/NON PROFIT CORPORATION  
DREAMS, INC.

Certificate of Status	1
Certified Copy	0
Page Count	06.07
Estimated Charge	\$78.75

10 JUL 23 PM 12:37

RECEIVED

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE.

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE.

Electronic Filing Menu

Corporate Filing Menu

Help  
J. Shivers JUL 26 2010

07/23/2010 10:32

8502058846

CORPDIRECT AGENTS

PAGE 02/07

07/22/2010 3:37:30 PM PAGE 1/001

Fax Server



July 22, 2010

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CORPDIRECT AGENTS, INC.

SUBJECT: DREAMS, INC.  
REF: W10000034451

**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 name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L10000029287.

If you have any further questions concerning your document, please call (850) 245-6962.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H10000166323  
Letter Number: 310A00017813

**PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE.**

P.O. BOX 6327 - Tallahassee, Florida 32314

H10000166323 3

**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. Dreams, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Ltd.," "Co." or "Corp.")

Dreams/Fansedge, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Utah

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

3. 870368170

(FBI number, if applicable)

4. April 9, 1980

(Date of incorporation)

5. Perpetual

(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. Two South University Drive, Suite 325, Plantation, FL 33324

(Principal office address)

Two South University Drive, Suite 325, Plantation, FL 33324

(Current mailing address)

8. Any lawful business purpose

(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: David M. GreeneOffice Address: Two South University Drive, Suite 325Plantation

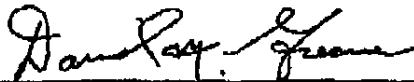
(City)

Florida 33324

(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.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 JUL 21 PM 2:00

FILED

H10000166323 3

H10000166323 3

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

## A. DIRECTORS

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

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

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

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

Director: ROSS TannenbaumAddress: Two South University Drive, Suite 325Plantation, FL 33324Director: Sam BattistoneAddress: Two South University Drive, Suite 325Plantation, FL 33324

## B. OFFICERS

President: ROSS TannenbaumAddress: Two South University DrivePlantation, FL 33324

Vice President: \_\_\_\_\_

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

Secretary: David M GreeneAddress: Two South University Drive, Suite 325, Plantation, FL 33324Treasurer: David M. GreeneAddress: Two South University Drive, Suite 325, Plantation, FL 33324

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. David M Greene, Secretary

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

2010 JUL 21 PM 2:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

H10000166323 3

H10000166323  
2010 JUL 21 PM 2:00  
FILED  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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

A. DIRECTORS

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

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

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

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

Director: Dale Larsson

Address: Two South University Drive, Suite 325

Plantation, FL 33324

Director: David Malina

Address: Two South University Drive, Suite 325

Plantation, FL 33324

B. OFFICERS

President: \_\_\_\_\_

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

Vice President: \_\_\_\_\_

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

Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

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

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. David M. Greene  
(Signature of Director or Officer listed in number 12 of the application)

14. David M Greene, Secretary  
(Typed or printed name and capacity of person signing application)

H10000166323 3

H10000166323

2010 JUL 21 PM 2:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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

## A. DIRECTORS

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

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

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

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

Director: Steven RubinAddress: Two South University Drive, Suite 325Plantation, FL 33324

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

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

## B. OFFICERS

President: \_\_\_\_\_

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

Vice President: \_\_\_\_\_

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

Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

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

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. David M. Greene  
(Signature of Director or Officer listed in number 12 of the application)14. David M Greene, Secretary  
(Typed or printed name and capacity of person signing application)

H10000166323 3

H10000166323 3



**Utah Department of Commerce**  
**Division of Corporations & Commercial Code**  
160 East 300 South, 2nd Floor, PO Box 146705  
Salt Lake City, UT 84114-6705  
Service Center: (801) 530-4849  
Toll Free: (877) 526-3994 Utah Residents  
Fax: (801) 530-6438  
Web Site: <http://www.commerce.utah.gov>

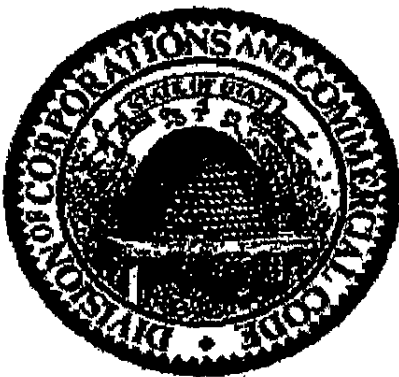
07/14/2010  
737814-014207142010-1204223

## CERTIFICATE OF EXISTENCE

**Registration Number:** 737814-0142  
**Business Name:** DREAMS, INC.  
**Registered Date:** April 09, 1980  
**Entity Type:** Corporation - Domestic - Profit  
**Current Status:** Good Standing

FILED  
2010 JUL 21 PM 2:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



*Kathy Berg*

Kathy Berg  
Director  
Division of Corporations and Commercial Code