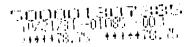
F95000000213

TO: QUALIFICATION/REGISTRATION SECTION DIMSION OF CORPORATIONS



SUBJECT: _	Interactive			Incorporated		
	(Name of corporation)					

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:

Joyco D. Holt (Name of Person)	vo	D
Interactive Videocom Systems, Inc.	S	
(Firm/Company)	t demande de la companya de la compa	(함) 기본국
1774 Long Slough Walls (Address)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	, n
Orange Park, Fl. 32073		1979 1979
(City, State and Zip Code)	25	변화 (2011 전
		-J

Should you need to call someone concerning this matter, please call:

Joyce Holt (Name of Person)	at (<u>904</u>) <u>264</u> <u>4561</u> . Area Code & Daytime Telephone Number
-----------------------------	--

COURIER ADDRESS:

Qualification/Registration Sec. Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRESS:

Qualification/Registration Sec. Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



Octobor 24, 1994

INTERACTIVE VIDEOCOMY SYSTEMS, INC. % JOYCE D. HOLT 1774 LONG SLOUGH WALK ORANGE PARK, FL 32073

SUBJECT: INTERACTIVE VIDEOCOMM SYSTEMS, INC.

Ref. Number: W94000022937

We have received your document for INTERACTIVE VIDEOCOMM SYSTEMS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

- The name listed in number one of the application must be identical to the name listed in the certificate of existence.
- Number 6 of the application must be completed. If the corporation has not transacted business or conducted its affairs in Florida because it has not received confirmation from this office, please insert the words "upon qualification" in lieu of a date.

Please return your document, along with 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 (904) 487-6094.

Steven Harris Corporate Specialist

Letter Number: 694A00046668



Florida Department of State P. O. Box 6327 Tallahassoo, Fl 32314

Attn: Steven Harris

Inclosed is our Application to do business in Florida. The items you listed that were in error have been corrected. The delay was due to an error made by the State of DElaware on our prior Certificate of Good Standing. They have corrected the error in our name and a new Certificate is enclosed with the application.

Thank you for your patience in this matter.

Sincoroly

Joyce D. Holt

Augus S. Black

95,120 13 £410:27

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. (Intoractive Videocom Systems, Name of corporation: must include the word INC abbreviations of like import in language as will cleap partnership if not so contained in the name at present the contained in the name at present the contained in the	Incorpor ORPORATED dy indicate the	ated)", "COMPAN satitis a con	Y*,*CORPOR poration inste	ATION* or words of a natural pe)r rscn
		,				
2.	State of Dolaware State or country under the law of which it is incorp	3.	59-3255	528		
4.	July 21, 1994 55.	Pernet (Duration:	บภ] Year corp. w	ill coase to ex	dst or "perpowal")	_
6.	— Upon Qualification Date first transacted business in Florida. ISee sec	tions 607.15	01, 607.1502	and 817.155	, F.S.J	
7.	1774 Long Slough Walk	<u> </u>				
	Orango Park, F1. 32073 (Current mailing addre		·			
	(Current mailing addre	955)				
8.	Software Development for inter (Purpose(s) of corporation authorized in home s	active v	idoo and	data sej led out in the	rvices marko sum of Florida)	<u>t.</u>
9.	Name and street address of Florida	registered	agent:		95 J	51,41g
	Name: Joyce D. Hol	t			27	ેં?
	1996 tong Sl	ough Wall	ic	_ _	13 !	
	Office Address:Orange Park,	<u>F).</u>		, Florida ,	32073 5 (Zip Code)	अस्ति के त
10). Registered agent's acceptance: aving been named as registered agent a	nd to acce	nt service (of process	for the above s	tated
CC	aving been named as registered agent all proporation at the place designated in thi gistered agent and agree to act in this ca all statutes relative to the proper and co	is applicati inacity. I fi	ion, i nerei irther aurei	oy accept e to compl	me appointme with the provi	sions

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.

with and accept the obligation's of my position as registered agent.

•		
12.	. Names and addresses of officers and/or directors:	•
Α.	DIRECTORS	
	Chairman: Manuel Clifford Holt	
	Address: 1774 Long Slough Walk	
	Orange Park, Fl. 32073	
	Vice Chairman:none	
	Address:	
	Director: Manuel Clifford Holt	
	Address: 1774 Long Slough Walk	
	Orange Park, F1. 32073	
	Director: Joyco D. Holt	
	Address: 1774 Long Slough Walk	
	Orange Park, Fl. 32073	
В.	OFFICERS	
	President: Manuel Clifford Holt	
	Address: 1774 Long Slough Walk	
	Orange Park, Fl. 32073	
	Vice President Manuel Clifford Holt	P SEARCE
	Address: <u>same</u>	
		3
	Secretary: Joyca D. Holt	705 3NE 7410: 27
	Address: 1774 long Slough Walk	115g
	Orange Park, Fl 32073	ಎ
	Treasurer: <u>Joyce D. Holt</u>	
	Address:same	

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

13. 11. (I) North Heith (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Manuel Clifford Holt
(Typed or printed name and capacity of person signing application)

PAGE

State of Delaware Office of the Secretary of State

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I dward J. Freel, Secretary of State

AUTHENTICATION

DATE