

# F95006002699

## TRANSMITTAL LETTER

TO: QUALIFICATION/TAX LIEN SECTION  
DIVISION OF CORPORATIONS


W95-10955

SUBJECT: ENHANCED SYSTEMS, 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:



MIKE MITTEL

(Name of Person)

ENHANCED SYSTEMS, INC.

(Firm/Company)

6961 Peachtree Industrial Blvd.

(Address)

Norcross, Ga. 30092

(City, State and Zip Code)

400001505464  
-06/02/95--01123--004  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

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

Mike Mittel  
(Name of Person)

at ( 404 ) 661 1503  
Area Code & Daytime Telephone Number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**COURIER ADDRESS:**

Qualification/Tax Lien Sec.  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

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



**FLORIDA DEPARTMENT OF STATE**

Sandra B. Mortham  
Secretary of State

**May 25, 1995**

**MIKE MITTEL  
ENHANCED SYSTEMS, INC.  
6961 PEACHTREE INDUSTRIAL BLVD.  
NORCROSS, GA 30092**

**SUBJECT: ENHANCED SYSTEMS, INC.  
Ref. Number: W95000010955**

We have received your document for ENHANCED SYSTEMS, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$70.00.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The date first transacted business in Florida within the meaning of s. 607.1501, F.S., must be set forth in section 6 of the application. If the corporation has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office is required to collect the minimum civil penalty of \$500 for each year other than the application filing year, that a foreign corporation transacts business in this state without authority along with the past annual report fees due this office.)

Only one registered agent may be listed in section #9. Please clarify who the registered agent is.

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) 487-6093.

Freta Lott  
Corporate Specialist Supervisor

Letter Number: 295A00026529

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE  
STATE OF FLORIDA:**

1. Enhanced Systems, Inc.  
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Georgia  
(State or country under the law of which it is incorporated)
3. 58-1688474  
(FEI number, if applicable)
4. 7/3/86  
(Date of Incorporation)
5. Perpetual  
(Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 617.155, F.S.)
7. 6961 Peachtree Industrial Boulevard  
Norcross, GA 30092  
(Current mailing address)
8. To sell telecommunication products in Florida  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent:  
Name: Jeff O'Connor  
Office Address: 5200 N. Federal Hwy.  
Suite 2, Ft. Lauderdale, Florida, 33308  
(Zip Code)

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TALLAHASSEE, FLORIDA

**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.*

Jeff O'Connor  
(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.

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: MICHAEL MITTEL - Mike Mittel

Address: 6961 Peachtree Industrial Blvd.  
Norcross, Ga. 30092

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

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

Director: Fereydoun Taslimi - Fereydoun Taslimi

Address: 6961 Peachtree Industrial Blvd.  
Norcross, Ga 30092

Director: MICHAEL MITTEL - Michael Mittel

Address: 6961 Peachtree Industrial Blvd.  
Norcross, Ga. 30092

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: MICHAEL MITTEL - Michael Mittel

Address: 6961 Peachtree Industrial Blvd.  
Norcross, Ga 30092

Vice President: Fereydoun Taslimi - Fereydoun Taslimi

Address: 6961 Peachtree Industrial Blvd.  
Norcross, Ga. 30092

Secretary: Fereydoun Taslimi - Fereydoun Taslimi

Address: 6961 Peachtree Industrial Blvd.  
Norcross, Ga 30092

Treasurer: Michael Mittel

Address: 6961 Peachtree Industrial Blvd.  
Norcross Ga, 30092

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

13. [Signature]  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Michael Mittel, President  
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**State of Georgia**  
**2 Martin Luther King Jr. Dr.**  
**Atlanta, Georgia 30334-1530**

**SECRET NUMBER** : 001340710  
**CONTROL NUMBER** : 0610730  
**DATE INC/AUTH/FILED** : 07/03/1986  
**JURISDICTION** : GEORGIA  
**PRINT DATE** : 05/16/1995  
**FORM NUMBER** : 211

**ENHANCED SYSTEMS**  
**ATTN: LAARNI MATA**  
**6961 P'TREE IND BLVD**  
**NORCROSS GA 30092**

### **CERTIFICATE OF EXISTENCE**

I, **MAX CLELAND**, Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### **ENHANCED SYSTEMS, INC.** **A DOMESTIC PROFIT CORPORATION**

was formed in the jurisdiction stated above and was incorporated, formed, or authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution or certificate of cancellation with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



*Max Cleland*  
**MAX CLELAND**  
**SECRETARY OF STATE**

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**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**CORPORATIONS**  
**656-2817**

**CORPORATIONS HOT LINE**  
**404-656-2222**  
**Outside Metro-Atlanta**