

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870

Mailing Address: P.O. Box 10349, Tallahassee, FL 32302

TOLL FREE No. 1-800-342-8062

FAX (904) 224-8822

F95000005031

NAME _____

FIRM _____

ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

W95-19630

RE: mydata Automation No. 52104

Inc.

Capital Express

Art. of Inc. File

Corp. Record Search

Ltd. Partnership File

Foreign Corp. File

() Gen. Copy(s)

Art. of Amend. File

Dissolution/Withdrawal

C U S-

Fictitious Name File

Name Reservation

Annual Report/Reinstatement

Reg. Agent Service

Document Filing

Corporate Kit

Vehicle Search

Driving Record

Document Retrieval

UCC 1 or 3 File

UCC 11 Search

UCC 11 Retrieval

File No.'s, Copies

Courier Service

Shipping/Handling

Phone ()

Top Priority

Express Mail Prep.

FAX () pgs.

SUBTOTALS

FEE..... \$

DISBURSED..... \$

SURCHARGE..... \$

TAX on corporate supplies..... \$

SUBTOTAL..... \$

PREPAID..... \$

BALANCE DUE..... \$

Please remit invoice number with payment
TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts
Past 30 Days, 18% per Annum.

THANK YOU
from
Your Capital Connection

REQUEST TAKEN CONFIRMED APPROVED

DATE _____

TIME 12:30 CK No. _____

BY nc

WALK-IN
Will Pick Up

10/2 12:30

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT 17 AM 10:55

TRANSMITTAL LETTER

~~CONFIDENTIAL~~

TO: QUALIFICATION/TAX LIEN SECTION
DIVISION OF CORPORATIONS

SUBJECT: MYDATA AUTOMATION 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:

Harry Christopher Goplerud, P.A.

H. C. Goplerud, Esq.

(Name of Person)

Honigman Miller Schwartz and Cohn

(Firm/Company)

401 East Jackson Street, Suite 2700

(Address)

Tampa, FL 33602

(City, State and Zip Code)

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95 OCT 17 AM 10:55

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

(Name of Person)

at ()

Area Code & Daytime Telephone Number

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

October 2, 1995

CAPITAL CONNECTION

SUBJECT: MYDATA AUTOMATION, INC.
Ref. Number: W95000019630

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT 17 AM 10:55

We have received your document for MYDATA AUTOMATION, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please provide a physical (street) address for the Chairman in the space provided.

A brief description of the entity's nature of business must be included in the document.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$2,400.00.

Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, which lists those activities that do not constitute transacting business or conducting affairs in this state. If after reviewing this section you determine erroneous information was inserted on the application, a sworn affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business or conducting its affairs in Florida prior to the year the application was submitted did not constitute transacting business or conducting affairs pursuant to section 607.1501 or 617.1501, Florida Statutes.

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) 487-6958.

Lee Rivers

Document Examiner

Letter Number: 395A00044741



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

October 5, 1995

CAPITAL CONNECTION

SUBJECT: MYDATA AUTOMATION
Ref. Number: W95000019630

We have received your document for MYDATA AUTOMATION, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A photocopy of the certificate of existence is not acceptable.

A new certificate for Mydata Automation, Inc. will need to be obtained from the Massachusetts Secretary of State as the certificate you have submitted is over 90 days old.

If you have any questions concerning the filing of your document, please call (904) 487-6093.

Freta Lott
Corporate Specialist Supervisor

Letter Number: 995A00045148

**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. MY DATA Automation, 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. MA
(State or country under the law of which it is incorporated)
3. 04-321 9080
(FEI number, if applicable)
4. 8/20/93
(Date of incorporation)
5. perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. 5/93
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 617.155, F.S.)
7. 99 Rosewood Drive Suite 280
Danvers MA 01923
(Current mailing address)
8. SALES AND DISTRIBUTION OF SURFACE MOUNT EQUIPMENT
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT 17 AM

9. Name and street address of Florida registered agent:

Name: Capital Connection Inc

Office Address: 417 E Virginia St Suite 1
Tallahassee

, Florida, 32301
(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.

Barbara Deely President
(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:

A. DIRECTORS

Chairman: Marten Lundberg
Address: Bromma, Sweden
KARLSBODAVAGEN 39

Vice Chairman: S-16170 Bromma
Address: SWEDEN.

Director: Brian Duffey
Address: 99 Rosewood Dr #280
Danvers MA 01923

Director: _____
Address: _____

B. OFFICERS

President: Brian Duffey
Address: 99 Rosewood Drive #280
Danvers MA 01923

Vice President: _____
Address: _____

Secretary: James DeMarco
Address: 99 Rosewood Dr #280
Danvers MA 01923

Treasurer: _____
Address: _____

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95 OCT 17 AM 10:55

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

13. Brian M. Duffey Director
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Brian Duffey - President / Director
(Typed or printed name and capacity of person signing application)



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

October 11, 1995

TO WHOM IT MAY CONCERN:

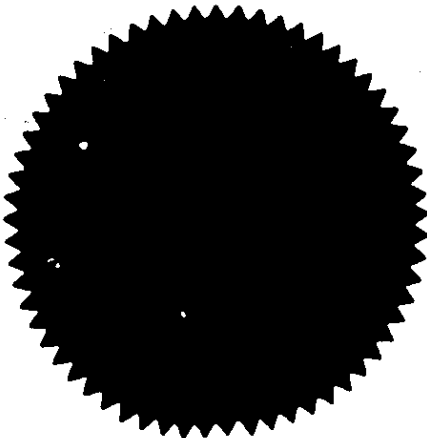
I hereby certify that according to the records of this office

Mydata Automation, Inc.

is a domestic corporation organized on **August 20, 1993**, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156B section 101 for said corporations dissolutions; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.

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SECRETARY OF STATE
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In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Francis Galvin

Secretary of the Commonwealth

* This is not a tax clearance. Certificates certifying that all taxes due and payable by the corporation have been paid or provided for are issued by the Department of Revenue.