

# F95000005734

**CAPITAL CONNECTION, INC.**  
 E. Virginia, Suite 1, Williamsburg, VA 23060 (804) 222-1222  
 Mailing Address: Post Office Box 49, Williamsburg, VA 23060  
 TOLL FREE No. 1-800-342-8062  
 FAX (804) 222-1222

NAME \_\_\_\_\_  
 FIRM \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
 One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Mailor No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

- |                                   | C.C. Fee.                | DISBURSED |
|-----------------------------------|--------------------------|-----------|
| _____ Capital Express™            | _____                    | _____     |
| _____ Art. of Inc. File           | _____                    | _____     |
| _____ Corp. Record Search         | _____                    | _____     |
| _____ Ltd. Partnership File       | _____                    | _____     |
| _____ Foreign Corp. File          | _____                    | _____     |
| _____ ( ) Cert. Copy(s)           | _____                    | _____     |
| _____ Art. of Amend., File        | _____                    | _____     |
| _____ Dissolution/Withdrawal      | 600.00 + 1.50            | _____     |
| _____ O U B.                      | - 11/27/95 = 01041 - 015 | _____     |
| _____ Fictitious Name File        | 444.22.50 *** 122.50     | _____     |
| _____ 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 Prop.          | _____                    | _____     |
| _____ FAX ( ) pgs.                | _____                    | _____     |

**SUBTOTALS** \_\_\_\_\_

11/27/95 11:11:45  
 95 101 21 11 10 41  
 RECEIVED STATE  
 REGISTRATIONS  
 11/27/95

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE _____	_____	_____	_____
TIME _____	_____	_____	CK No. _____
BY <u>AAK</u>	_____	_____	_____

WALK-IN  
 Will Pick Up 11/27 1200

FEE.....	\$ 41
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

**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. SHARK PRODUCTS, 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. New York 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 4/9/91 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. date of filing  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.))

7. 145 Huguenot Street  
New Rochelle, New York 10801  
(Current mailing address)

8. To market and sell hair care and affiliated products  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

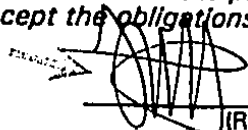
9. **Name and street address of Florida registered agent:**

Name: Thomas Hood

Office Address: 4241 Baymeadows Road, Suite 4  
Jacksonville, Florida, 32217  
(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)  
Thomas Hood

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: Brian K. Marks

Address: 149-28 Tenth Avenue

Whitestone, NY 11357

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

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

Director: Brian K. Marks

Address: 149-28 Tenth Avenue

Whitestone, NY 11357

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

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

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

President: Brian K. Marks

Address: 149-28 Tenth Avenue

Whitestone, NY 11357

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

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

Secretary: Brian K. Marks

Address: 149-28 Tenth Avenue

Whitestone, NY 11357

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

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

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. Brian K. Marks, President/Chairman  
(Typed or printed name and capacity of person signing application)

State of New York  
Department of State | ss:

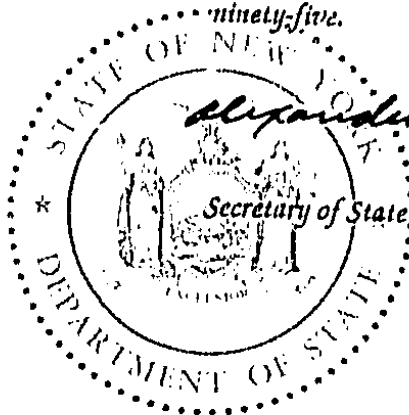
I hereby certify, that the certificate of incorporation of SHARK PRODUCTS, INC. was filed on 04/09/1991, with perpetual duration, and that I have made a diligent examination of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, I find no such certificate, order or record, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

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Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 10th day of November  
one thousand nine hundred and  
ninety-five.

RECEIVED  
DEPARTMENT OF STATE  
NOV 27 11:45

*Alexander F. Trenchard*



199511130163