F9600000427/

SUBJEC	T: American Steamship Agency Corporation (Name of corporation - must include suffix)
	or Madam:
The enclo Florida", foreign co	osed "Application by Foreign Corporation for Authorization to Transact Business in "Certificate of Existence", and check are submitted to register the above referenced orporation to transact business in Florida.
Please ret	turn all correspondence concerning this matter to the following:
	Dennis Lynch (Name of Person)
	American Steamship Agency Corporation 4000013171 -08/08/960110901 +****78.75 *****78
	50 Maple Street (Address)
	Norwood, NJ 07648 (City/State/Zip)
Should ye	ou need to call someone concerning this matter, please call:
	s Lynch at (201) 784-1700 Name of Person) (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 Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314





August 9, 1996

DENNIS LYNCH AMERICAN STEAMSHIP AGENCY CORPORATION 50 MAPLE ST. NORWOOD, NJ 07648

SUBJECT: AMERICAN STEAMSHIP AGENCY CORPORATION Ref. Number: W96000016691

We have received your document for AMERICAN STEAMSHIP AGENCY CORPORATION 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 registered agent must sign accepting the designation.

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) 487-6095.

Jennifer Sindt Document Examiner

Letter Number: 196A00038059

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:

١.	American Steamship Agency Corporation
•	(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 27 2616160
2.	(State or country under the law of which it is incorporated) (FBI number, if applicable)
	Perpetual
4.	April 6, 1983 (Date of Incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")
	June 25. 1996 (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
7.	
	50 Maple Street, Norwood, NJ 07648 (Current mailing address)
	Comm. Broker (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: (P.O. Box or Mail Drop Box NOT) acceptable)
	Name: Roy Lombardo
	Office Address: 8410 NW 70th Street
	, Florida ,, Zip Code)
10	Registered agent's acceptance:
He co re al an	aving been named as registered agent and to accept service of process for the above stated in this application, I hereby accept the appointment as gistered agent and agree to act in this capacity. I further agree to comply with the provisions of I statutes relative to the proper and complete performance of my duties, and I am familiar with ad accept the obligations of my position as registered agent. (Registered agent's signature)
1 1	. 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) Address: _____ Vice Chairman: Address: Director: Address: _____ Director: ___ Address: B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: Dennis Lynch Address: _____50 Maple Street _____ Norwood, NJ 07648 Vice President: ____John Gurrieri Address: 50 Maple Street Norwood, NJ 07648 Secretary: Address: _____ Treasurer: Address: ______ **NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Opposite Lynch (Typed or printed hame and capacity of person signing application)

NEW JERSEY SECRETARY OF STATE

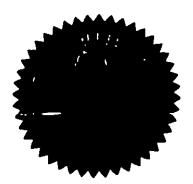
AMERICAN STEAMSHIP AGENCY CORPORATION

- I, THE SECRETARY OF STATE OF THE STATE OF NEW JERSEY, DO HEREBY CERTIFY THAT THE RECORDS OF THIS OFFICE SHOW THAT THE CHARTER/AUTHORITY OF THE ABOVE-NAMED NJ BUSINESS WAS FILED IN THIS OFFICE ON APR. OG,1983.
- I FURTHER CERTIFY, THAT SO FAR AS THE RECORDS OF THIS OFFICE SHOW, SAID BUSINESS HAS NOT BEEN DISSOLVED, CANCELLED, OR WITHDRAWN, NOR HAS ITS CHARTER/AUTHORITY BEEN VOIDED/REVOKED FOR NON-PAYMENT OF STATE TAXES BY PROCLAMATION. IT NOW CONTINUES TO MAINTAIN ACTIVE STATUS WITHIN THE STATE OF NEW JERSEY. AT THE TIME OF THE ISSUANCE OF THIS CERTIFICATE, ANNUAL REPORTS ARE CURRENT.
 - I FURTHER CERTIFY THAT THE LOCATION OF THE REGISTERED OFFICE IS 58 BEECHWOOD RD

2
ORADELL
NJ 07649
AND THE REGISTERED AGENT IS DENNIS LYNCH.

JUN. 19,1996

Choruna ic. blossay



State of the state