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TRANSMITTAL LETTER

TO: QUALIFICATION/TAX LIEN SECTION
DIVISION OF CORPORATIONS

SUBJECT: Trefil ARBED Arkansas, Incorporated
(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:

MARC SCHROEDER
(Name of Person)
Trefil ARBED Arkansas, Incorporated
(Firm/Company)
PO Box 9450
(Address)
Pine Bluff AR 71611
(City, State and Zip Code)

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

MARC SCHROEDER at (501) 247-2444
(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 Sec.
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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. TrefilARBED Arkansas Incorporated
(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. ARKANSAS
(State or country under the law of which it is incorporated)
3. 71-0679612
(FEI number, if applicable)
4. 6-15-1989
(Date of Incorporation)
5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual")
6. future
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. 5100 Industrial Drive South, Pine Bluff, AR 71602
PO Box 9450 Pine Bluff, AR 71611
(Current mailing address)
8. Sale of brass plated steel wire manufactured at TrefilARBED
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Arkansas Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: C.T. Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida, 33324
(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.
See attached lett. - "Acceptance of appointment"
(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.

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55 AUG 26 PM 1:38

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: MR GILBERT KREMER

Address: L - 3235 ACTENBOURG GRAND DUCHY OF LUXEMBOURG EUROPE

Vice Chairman: N/A

Address: N/A

Director: MR EDUARD FEYEL

Address: 5100 INDUSTRIAL DRIVE SOUTH, PINE BLUFF AR 71602

Director: MR MICHEL THOMAS

Address: _____

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

President: MR EDUARD FEYEL

Address: 5100 INDUSTRIAL DRIVE SOUTH, PINE BLUFF AR 71602

Vice President: MR PETER WELTER

Address: 5100 INDUSTRIAL DRIVE SOUTH, PINE BLUFF AR 71602

Secretary: MR MARC SCHROEDER

Address: 5100 INDUSTRIAL DRIVE SOUTH, PINE BLUFF AR 71602

Treasurer: SAME THAN SECRETARY

Address: SAME THAN SECRETARY

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

13. 

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

14. MARC SCHROEDER SECRETARY / TREASURER

(Typed or printed name and capacity of person signing application)

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56 AUG 26 PM 1:37

ACCEPTANCE OF APPOINTMENT

RE: TREFILARBED OF ARKANSAS, INC. (LUX DOM)

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated: July 17, 1996

By

C/T CORPORATION SYSTEM

Jonathan L. Miles,
Assistant Secretary

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Sharon Priest
SECRETARY OF STATE

State of Arkansas SECRETARY OF STATE

C E R T I F I C A T E O F E X I S T E N C E

I, Sharon Priest, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show:

TREFILARBED ARKANSAS, INC.

A CORPORATION CHARTERED UNDER THE LAWS OF THE STATE OF ARKANSAS, FILED ~~ARTICLES~~ OF INCORPORATION IN THIS OFFICE JUNE 15, 1989.

OUR RECORDS REFLECT THIS CORPORATION HAS PAID ALL FEES, TAXES AND PENALTIES DUE TO THIS STATE, AS REQUIRED TO BE COLLECTED BY THIS OFFICE, AND HAS DELIVERED ITS MOST CURRENT ANNUAL CORPORATE FRANCHISE TAX REPORT TO THIS OFFICE.

I CERTIFY THIS CORPORATION HAS NOT FILED ARTICLES OF DISSOLUTION WITH THIS OFFICE.

IN TESTIMONY WHEREOF, I have hereunto
set my hand and Official Seal on this, the
14TH day of AUGUST, 19 96.

Sharon Priest

Sharon Priest
Secretary of State

By: *David Morrow*

DAVID MORROW

C-3/Rev 10-1-88