77 Ireland Amilyvolle City/State/Zi	estor's Name 1 PL 96 SEP Address 5-16 DIVISION (NY 1/701 242 8/35 Phone # \$\langle 13 507 \(\)	Office Use Only
	TSland Supplies tion Name) (D	• • • •
_	·	ocument #)
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<u> </u>	Pick up time	Certified Copy
NEW FILINGS	AMENDMENTS	
Profit NonProfit	Amendment Resignation of R.A., Officer/ Direct	30001943263 -09/10/9601094006 ****122.50
Limited Liability Domestication	Change of Registered Agent Dissolution/Withdrawal	****122.50 ****122.50
Other	Merger	Sirving
OTHER FILINGS Annual Report	REGISTRATION/ QUALIFICATION	SEP OR
Fictitious Name	Foreign	THEO STATE OF CORPORATIONS 10 AN II: 31
Name Reservation	Limited Partnership	II: ()
<u></u>	Reinstatement	3) OSS
 	Trademark	
	Other	

Examiner's Initials

CR29-31-1-955

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. Interactive I sland Supplies INC
1. Interactive I sland Supplies INC (Name of corporation: must include the word "NCORPORATED", "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. 11 - 3 25 9664 (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 3-30-95 5. Percetion Duration: Year corp. will coase to exist or "perpetual")
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 9-16-96 (Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.)
7. 600 - 27 Portioned Stely?
Ron Kun Koma NY 11779 (Current mailing address)
8. Whole sale of Audio equipment Segment (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floriday Segment
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan
9. Name and street address of Florida registered agent: 9. 19. 19. 19. 19. 19. 19. 19. 19. 19.
$=$ $^{\circ}$ 22r
Name: Joseph Fuller = 35
Name: Joseph Fuller Office Address: 14460 60th St N Clear Water , Florida, 34620 (Zip Code)
<u>Clear water</u> , Florida, 34620
(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. (Redistred 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.

 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: Theodore Nicols
Address: 24 W. Rayroad ave
Tenafly NO 07670
Vice Chairman: Joe Fuller
Address: 73 Ireland PL
Amitfulle N/ 11701
Director:
Address:
Director:
Address:
B.OFFICERS(Street address only- P. O. Box NOT acceptable)
President: The odore Nicols
Address: 24 W. Rulyoad ave
Tenafly NJ 07670
Vice President: Joseph Fuller
Address: 73 Ireland PL
Amityvilla Ny 11701
Secretary:
Address:
Treasurer:
Address:
. 1
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. Joseph Fuller V.P. V.C.
(Typed or printed name and capacity of person signing application)

5. DEPARTMENT BE STATE FOR THE RECORDS 11-325 TWO 7.62 WASHINGTON AVENI

TITLING RECEIPT

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DOCUMENT FORE INCORPORATION (DOM. BUSINESS)

COUNTY NASS

SERVICE COMPANY - XL CORPORATE SERVICES, INC.

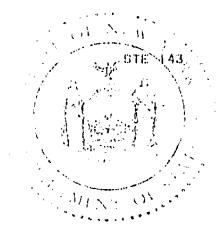
SERVICE CODE: 39

ADDRESS FOR PROCESS

THE CORPORATION 600-27 PORTION RD RONKONKAMA, NY 11779

REGISTERED AGENT

STOCK: 200 NPV



SECRETAL OF STATE OF

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FILER	FEES	160.00	PAYMENTS	160.00
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98 WILLIS AVENUE	TAX .	10.00	CHECK :	0.00
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25: (11/89)

State of New York

Department of State Ss:

I hereby certify, that the certificate of incorporation of INTERACTIVE ISLAND SUPPLIES INC. was filed on 03/30/1995, with perpetual duration, and that a diligent examination has been made of the index of corporation papers filed in this Department for n certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 27th day of September one thousand nine hundred and

NEW SIX

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of Deputy Secretary of State

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SECRETARY OF STATE
DIVISION OF CORPORATION