Certificate of Cristine DOO 58

1000019972111--7 -10/28/96-01047--001 TO: Qualification/Tax Lien Section **Division of Corporations** ****4001.001 ****4001.00 PATRICIA JASANO INC.

(Name of corporation - must include suffix)

DBA - JASANO 1. ASSOCIATES 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. w96-20715 Please return all correspondence concerning this matter to the following: SANdy ORRICO (Name of Person) Should you need to call someone concerning this matter, please call:

SANdy OPPICO (Name/of Person)

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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 1, 1996

SANDY ORRICO FASANO AND ASSOCIATES 3599 CAHUENGA BLVD W #400 LOS ANGELES, CA 90068

SUBJECT: PATRICIA FASANO INC. Ref. Number: W96000020715

We have received your document for PATRICIA FASANO 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):

Pursuant to section 607.1502(4) or 617.1502(4), F.S., this office is required to collect a penalty of \$1000 for each year this corporation transacted business in Florida prior to qualification and the appropriate annual report fees that would have been due had the corporation qualified the year it began operation in this state.

However, the \$1000 per year penalty fee is waived, pursuant to laws of Florida 96-212, for any corporation that applies for a certificate of authority between July 1, 1996 and December 1, 1996.

The total amount due this office through December 31, 1996 to cover the back annual report(s) is \$400.00.

Your cover letter refers to a "d/b/a" name of "FASANO & ASSOCIATES." If the corporation wishes to do business in Florida under a name other than the corporate name, it must file an application for a Fictitious Name. An application is being mailed to you under separate cover.

If you have any questions concerning the filing of your document, please call (904) 487-6958.

Lee Rivers Document Examiner 520945

Letter Number: 696A00044913



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 28, 1996

SANDY ORRICO FASANO AND ASSOCIATES 3599 CAHUENGA BLVD W #400 LOS ANGELES, CA 90068

SUBJECT: PATRICIA FASANO INC. Ref. Number: 'W96000020715

We have received your document for PATRICIA FASANO INC. and your check(s) totaling \$400.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to note the following correction in our previous letter. Please note that the corporation cannot serve as its own Registered Agent.

The registered agent designated must be an active Florida corporation or a foreign corporation authorized to transact business in Florida. Please correct the document.



Please note that the corporation cannot serve as its own Registered Agent.

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: 296A00049605

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZA 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:

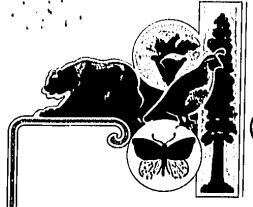
1. PARICIA FASANO TNC. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
natural person or partnership if not so contained in the name at present.)
2. CALIFORNIA (State or country under the law of which it is incorporated) 3. 95-370 9925 (FEI number, if applicable)
4. 2/24/82 5. PERPETURE (Date of Ingerporation) 5. (Duration: Year corp. will cease to exist or "perretual")
6. 10/12/94/ 55 55 55 55 55 55 55 55 55 55 55 55 55
7. 35 99 CAhuenga Blvd, W. # 400
6. 10/12/94 Characted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.153, F.S.) 7. 35 99 CAHUENGA BLVd. W. # 400 Los Angeles CA 91406 SON (Current mailing address)
(Current mailing address)
8. DIR CT MAIL BROKERS (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: FRANCHESCA WOIIMAN
Office Address: 7721 NEWPORT LANE
PARK LAND . Florida , 33067 (Zip Code)
10. Registered agent's acceptance: (Zip Code)
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)

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.

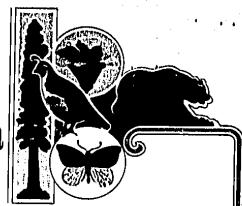
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12. Names an NOT acc	d addresses of officers and/or directors: (Street address ONLY-P. O	. Box
A. DIRECT	ORS (Street address only- P. O'. Box NOT acceptable)	• • •
Chairman:		
Vice Chairman	1:	
Director:		
Director:		
B. OFFICERS	S (Street address only- P. O. Box NOT acceptable)	ب ج
President:	PATRICIA PASANO	
Address: <u>9</u>	771 DONNINGTON PLACE everly Hills CA 90210	
/ice President:		7 .
Address:	port	
ccretary: .ddress:	pune	
<u> </u>		
reasurer:	me	
ddress:	- fa	
3. Tatrie	ieu Fasano	
(Signature	c of Chairman, Vice Chairman, or any officer listed in number 12 of the application CIA TASAND PRESIDENT)



State of California

SECRETARY OF STATE



CERTIFICATE OF STATUS DOMESTIC CORPORATION

1, BILL JONES, Secretary of State of the State of California, hereby certify:

That on the 24Til day of FEBRUARY, 19

PATRICIA FASANO INC.

became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



BILL JONES
Secretary of State

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this 10TH day of SEPTEMBER 1996

94 25216

SEC/STATE FORM CE-112 (REV. 1-95)