

Document Number Only
F96000006525

CT CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

300000206279--6
-12/11/96--01069--021
*****70.00 *****70.00

W96-26068

Fantasy Unlimited Inc.

96 DEC 11 PM 12:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

72-13

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | | |
| <input type="checkbox"/> Limited Liability Co. | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input checked="" type="checkbox"/> Foreign | | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other ucc Filing |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of R.A. |
| | | <input type="checkbox"/> Fic. Name |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

Name
Availability
Document Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

PLEASE RETURN EXTRA COPIES
FILE STAMPED

12-11

96 DEC 11 PM 12:22
RECEIVED
DIVISION OF REGISTRATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

December 11, 1996

C T CORPORATION SYSTEM

SUBJECT: FANTASY UNLIMITED INC.
Ref. Number: W96000026008

We have received your document for FANTASY UNLIMITED INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The name you are requesting is unavailable, since it has been reserved by another individual. In order to use the name you must obtain their release. When the document is resubmitted, please return a copy of this letter to ensure proper handling.

If you have any questions about the availability of a particular corporate name, please call (904) 488-9000.

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) 487-6097.

Michael Mays
Document Specialist

Letter Number: 796A00055375

Michael,

*Please file per our 12-13-96
discussion today.
Please back date to 12-11.*

*Thanks—
Tamar*

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION
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. Fantasy Unlimited 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

(State or country under the law of which it is incorporated)

3. 11-2987873

(FEI number, if applicable)

4. 08/16/89

(Date of Incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. On or about December 16, 1996

(Date first transacted business in Florida. (See sections 607.1501, 607.1502 and 607.1503, F.S.))

7. c/o Bartlett T. Polster

2 Channel Drive
Port Washington, N.Y. 11050

(Current mailing address)

8. leasing and operation of aircraft

(Purpose(s) of corporation authorized in home state or country to be carried out in this state of Florida)

9. Name and street address of Florida registered agent:

Name: C T CORPORATION SYSTEM

Office Address: c/o C T Corporation System, 1200 South Pine Island Road

Plantation, Florida, 33324

(Zip Code)

10. Registered agent 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.

C T CORPORATION SYSTEM

Kimberly D. Gilbertson
(Registered agent's signature) (Officer)

Kimberly D. Gilbertson

(Type Name and Title of Officer)

Asst. Sec.

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:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Nelson Doubleday

Address: 7830 Byron Drive

West Palm Beach, Florida 33404

Director: Richard M. Cummins

Address: 1301 Avenue of the Americas

New York, New York 10019

B. OFFICERS

President: Bartlett T. Polster

Address: 2 Channel Drive

Port Washington, New York 11050

Vice President: _____

Address: _____

Secretary: Richard M. Cummins

Address: 1301 Avenue of the Americas

New York, New York 10019

Treasurer: Bartlett T. Polster

Address: 2 Channel Drive

Port Washington, New York 11050

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

13. *Bartlett T. Polster*
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Bartlett T. Polster, President and Treasurer
(Typed or printed name and capacity of person signing application)

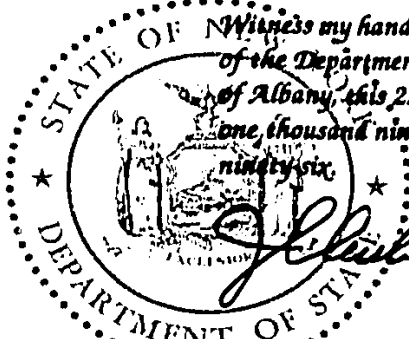
State of New York
Department of State | **ss:**

I hereby certify, that the certificate of incorporation of FANTASY UNLIMITED INC. was filed on 08/16/1989, under the name of NELSON AIRCRAFT INC., with perpetual duration, and that a diligent examination has been made of the index of corporation papers filed in this Department for a 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.

A Certificate of Amendment NELSON AIRCRAFT INC., changing name to FANTASY UNLIMITED INC., was filed 10/04/1989.

The Corporation Biennial Statement is *pas.* due.

Witness my hand and the official seal
of the Department of State at the City
of Albany, this 22nd day of November
one thousand nine hundred and
ninety six.



[Signature]
Special Deputy Secretary of State

199611250222 59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

96 DEC 11 PM 12:22

FILED