

F97000005738

0-00-07 11:24AM FROM-BUSINESS SERVICES

T-126 P.01/04 F-709

10/29/97 FLORIDA DIVISION OF CORPORATIONS 1:04 PM  
PUBLIC ACCESS SYSTEM  
ELECTRONIC FILING COVER SHEET

(((H970000180079)))

TO: DIVISION OF CORPORATIONS FAX #: (850)922-4000

FROM: BUSINESS FILINGS ACCT#: 105256001620  
CONTACT: RICHARD OSTER  
PHONE: (608)251-6600 FAX #: (608)251-6907

NAME: CHLORIZYM INTERNATIONAL, INC.  
AUDIT NUMBER.....H97000018007  
DOC TYPE.....FOREIGN PROFIT QUALIFICATION  
CERT. OF STATUS..1 PAGES... 2  
CERT. COPIES.....0 DEL.METHOD.. FAX  
EST.CHARGE . \$78.75

NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET TYPE THE FAX  
AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

\*\* ENTER 'M' FOR MENU. \*\*

ENTER SELECTION AND <CR>.

RECEIVED  
97 OCT 30 PM 12:26  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
97 OCT 30 PM 1:40

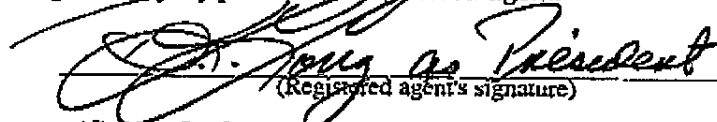
mtm  
10/30

## 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. CHLORIZYM INTERNATIONAL, 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. STATE OF NEVADA  
(State or country under the law of which it is incorporated)
3. \_\_\_\_\_  
(FEI number, if applicable)
4. OCTOBER 3, 1997  
(Date of Incorporation)
5. PERPETUAL  
(Duration: Year corp. will cease to exist or "perpetual")
6. NOV. 2 1997  
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. 3956 TOWN CENTER BLVD. SUITE 199  
ORLANDO FL. 32837  
(Current mailing address)
8. MANUFACTURING, SALES AND ALL RELATED ACTIVITIES  
(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: BERNARD L. LONG  
Office Address: 1232 E. LIVINGSTON ST.  
ORLANDO, Florida, 32803  
(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.

  
(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.

## 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: Bernard L. LongAddress: 1232 E. Livingston St.  
Orlando FL 32803

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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

President: BERNARD L. LONGAddress: 1232 E. LIVINGSTON ST.  
ORLANDO FL 32803

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

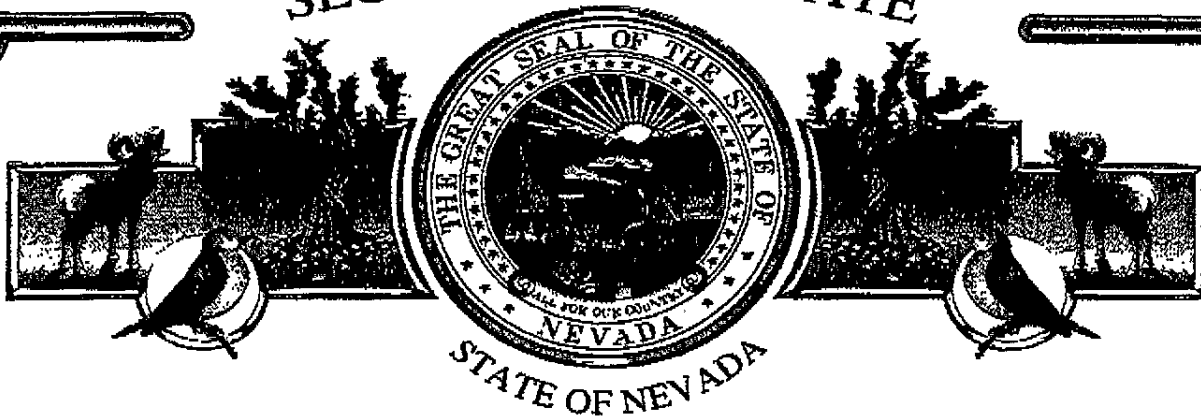
13. Bernard L. Long as President

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

14. BERNARD L. LONG

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

## SECRETARY OF STATE



# CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **CHLORIZYM INTERNATIONAL, INC.** as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 3, 1997, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on October 22, 1997.



*Dean Heller*  
Secretary of State

By

*Regueline Wray*  
Certification Clerk

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
OCT 30 PM 1:30