F9700000636368

TO: Qualification/Registration Section Division of Corporations

SUBJECT: Claxon, Inc. (Name of Corporation)

> 600002320716--4 -10/15/97--01025--002

Dear Sir or Madam:

****140.00 *****70.00

W97-23491

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conducts its affairs in Florida.

Please return all correspondence concerning this matter to the following:

	(Name of Person)	Q
	Claxon, Inc.	I DE
	(Firm/Company)	8
	23 Watts Street (6)	မီ
	(Address)	
	(1.104.003)	¹
	New York, NY 10013	<u>မ</u>
	(City, State and Zip Code)	
further	information concerning this matter, please call:	

Jennifer Reidy

at (<u>212</u>) <u>925</u> - <u>5909</u>

(Name of Person)

Area Code & Daytime Telephone Number

COURIER ADDRESS:

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 Not required to pay penalty do to a mix up with ficlitions warne filing in 1990. Mutu

Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 31, 1997

ELEANOR STINSON 209 NINTH STREET MIAMI BEACH, FL 33139

SUBJECT: CLAXON, INC. Ref. Number: W97000023491

We have received your document for CLAXON, 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:

Section 617.1502(4), Florida Statutes, requires this office to collect a \$1000 penalty fee and the appropriate annual report fees beginning with the year 1991 for conducting its affairs in Florida prior to qualification. The amount due this soffice to cover both annual report and penalty fees is \$6368.00.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 697A00050377



APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1.	Claxon, Inc. (Name of corporation: must include the word "INCORPORATED" or "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. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)	. .
2.	New York, New York 3. 133508513 (State or country under the law of which it is incorporated) (FEI number, if applicable)	-
4.	December 20, 1988 5	
6.	(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)	
7.	23 Watts Street, Floor 6	
	New York, NY 10013	
	(Current mailing address)	

8. <u>Claxon, Inc. is a general partner of NEXT Management Co.</u> (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:

Eleanor Stinson c/o NEXT Management Co. 209 Ninth Street (Office address) Miami Beach (City) (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.

leanor (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	
Chairman:	·
Address:	· · ·
	πr ··· ⊥;
Vice Chairman:	<u>.</u>
Address:	<u>.</u>
	· · · · · · · · · · · · · · · · · · ·
Director:	97 7
	DE
Address:	
	CONCEL
Director:	ED OF STR PM (2:
Address:	· · · · · · · · · · · · · · · · · · ·
B.OFFICERS (Street address only- P. O. Box NOT acceptable)	60 <u> </u>
President: <u>Giorgio Santambrogio</u>	·
Address:Corso Di Porta	
Romana 60, Italy	
Vice President:Lorenzo Pedrini	
Address: Via Grigna 7	
20155_Milano, Italy	
Secretary:Lorenzo_Pedrini	
Address:	
Treasurer: Paolo Roberti	-
Address:Corso Di Porta Vittoria 56	
20122 Milano, Italy	
NOTE: If necessary, you may attach an addendum to the application listing add	litional officers
and/or directors.	
13. Man Dwg Cff	· · · ·
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) –
Giorgio Santambrogio, Président	
(Typed or printed name and capacity of person signing application)	

State of New York SS: **Department** of State

I hereby certify, that the certificate of incorporation of CLAXON, INC. was filed on 12/20/1988, 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.

The Corporation Biennial Statement is past due.

Witness my hand and the official seal of the Department of State at the City of Albany, this 05th day of September one thousand nine hundred and ninety-seven. 97 DEC -3 PM 12: 3



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