

F 97000006677

Document Number Only

CT CORPORATION SYSTEM

660 EAST JEFFERSON STREET

Requestor's Name  
TALLAHASSEE, FL 32301

Address  
222-1092

City State Zip Phone

CORPORATION(S) NAME

800002374738--1  
-12/17/97--01050--006  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

800002374738--1  
-12/17/97--01050--007  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

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-12/17/97--01050--008  
\*\*\*\*\*52.50 \*\*\*\*\*52.50

Epani, Inc.

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DIVISION OF CORPORATIONS  
97 DEC 17 9 PM ET: 38  
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<input checked="" type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> NonProfit	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
<input type="checkbox"/> Limited Liability Co.	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> Foreign	<input type="checkbox"/> Reservation	<input type="checkbox"/> Change of R.A.
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Photo Copies	<input type="checkbox"/> Fictitious Name Filing
<input type="checkbox"/> Reinstatement	<input type="checkbox"/> CUS	
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call if Problem
	<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

DEC 17 1997

Thanks,  
Jeff

## 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. EPANI, 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. DELAWARE  
(State or country under the law of which it is incorporated)
3. Applied for  
(FEI number, if applicable)
4. APRIL 29, 1997  
(Date of incorporation)
5. PERPETUAL  
(Duration: Year corp. will cease to exist or "perpetual")
6. DECEMBER 20, 1997  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.))
7. 6620 PARSON BROWN DRIVE  
ORLANDO, FL 32819  
(Current mailing address)
8. TRADING IN GOODS (GOLF PRODUCTS)  
(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:

Name: CT 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 obligation of my position as registered agent.*

CT CORPORATION SYSTEM

(Registered agent's signature) (Officer)

Kimberly D. Gilbertson Assistant Secretary

(Type Name and Title of Officer)

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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: MAGNUS ANDREN

Address: % LAGERLOF & LEMAN, 712 FIFTH AVE  
NEW YORK, NY 10019

Director: PATRIK ELIASSON

Address: KRISTINEBERG SVAGEN 17  
S-302 41 HALMSTAD, SWEDEN

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B. OFFICERS

President: PATRIK ELIASSON

Address: KRISTINEBERG SVAGEN 17  
S-302 41 HALMSTAD, SWEDEN

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

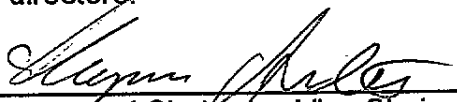
Address: \_\_\_\_\_

Secretary: MAGNUS ANDREN

Address: % LAGERLOF & LEMAN, 712 FIFTH AVE  
NEW YORK, NY 10019

Treasurer: MAGNUS ANDRÉNAddress: % LAGERLOF LEMAN, 712 FIFTH AVE  
NEW YORK, NY 10019

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. MAGNUS ANDREN, DIRECTOR, SECRETARY/TREASURER  
(Typed or printed name and capacity of person signing application)

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*State of Delaware*  
*Office of the Secretary of State*


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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EPANI, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF DECEMBER, A.D. 1997.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

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DIVISION OF CORPORATIONS  
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Edward J. Freel, Secretary of State

AUTHENTICATION:

8807407

DATE:

12-12-97

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