

Document Number Only
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C T CORPORATION SYSTEM

Requestor's Name
660 East Jefferson Street

Address
Tallahassee, Florida 32301

City State Zip Phone

CORPORATION(S) NAME

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*****70.00 *****70.00

T. Barile & Associates Inc.

<input checked="" type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> NonProfit		
<input type="checkbox"/> Limited Liability Company	<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
<input type="checkbox"/> Reinstatement	<input type="checkbox"/> Reservation	<input type="checkbox"/> Change of R...
<input type="checkbox"/> Limited Liability Partnership		<input type="checkbox"/> Fictitious 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 type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

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THANKS, MELANIE
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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. T. BARILE & ASSOCIATES, 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 JERSEY
(State or country under the law of which it is incorporated)

3. 22 2953177
(FEI number, if applicable)

4. FEBRUARY 24, 1989
(Date of incorporation)

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

6. UPON FILING
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.))

7. 20 BRANCH BROOK ROAD
WILTON, CT 06897
(Current mailing address)

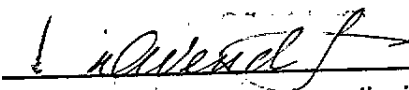
8. Executive Search Firm
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: DIANA WENDT
Office Address: 6415 S.W. 82ND ST.
MIAMI Florida, 33143
(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.


(Registered agent's signature) (Officer)

DIANA WENDT
(Type Name and Title of Officer)

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: THOMAS BARILE

Address: c/o 20 Branch Brook Road

Wilton, CT 06897

Director: _____

Address: _____

B. OFFICERS

President: THOMAS BARILE

Address: c/o 20 Branch Brook Road

Wilton, CT 06897

Vice President: _____

Address: _____

Secretary: THOMAS BARILE

Address: c/o 20 Branch Brook Road

Wilton, CT 06897

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Treasurer: THOMAS BARILE

Address: c/o 20 Branch Brook Road
Wilton, CT 06897

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

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

14. THOMAS BARILE - PRESIDENT
(Typed or printed name and capacity of person signing application)

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STATE OF NEW JERSEY
DEPARTMENT OF STATE
SHORT FORM STANDING

T. BARILE & ASSOCIATES, INC.

I, the Secretary of State of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on February 24, 1989.

As of the date of this certificate, said business continues as an active business in the State of New Jersey. Annual Reports are outstanding for the following year(s):

1997

I further certify that the registered agent and registered office are:

*David J Ritter Esq
%Brach Eichler
101 Eisenhower Parkway
Roseland, NJ 07068*

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STATE OF NEW JERSEY

STATE OF NEW JERSEY
DEPARTMENT OF STATE
SHORT FORM STANDING

T. BARILE & ASSOCIATES, INC.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
22nd day of December, 1997

Lonna R. Hooks

LONNA R HOOKS
Secretary of State

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