

**AFFILIATED METROPOLITAN CONTRACTORS
INC.**

F98000000324
January 16, 1998

Florida Dept. of State
Qualifications/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, Fl. 32399

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-01/21/98--01048--003
*****70.00 *****70.00

Re: Qualification to Transact Business in Florida

To Whom It May Concern:

Please find enclosed a completed Application by Foreign Corporation for authorization to Transact Business in Florida, an original Certificate of Existence and a check for the fee. Per my conversation with Mr. Hart this morning, I am also including a completed DHL waybill for a speedier return of our authorization.

If you should need any other information, please call me at (281) 443-7481. Thank you in advance for your prompt attention to this matter.

Very truly yours,


Susan Nichols
Office Manager

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Affiliated Metropolitan Contractors, Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Stacy Roberts

(Name of Person)

Affiliated Metropolitan Contractors, Inc.

(Firm/Company)

2422 Green Rock Road

(Address)

Houston, Tx. 77032

(City/State/Zip)

Should you need to call someone concerning this matter, please call:

Stacy Roberts

(Name of Person)

at (281) 443-7481

(Area Code & Daytime Telephone Number)

COURIER ADDRESS:

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

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**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. Affiliated Metropolitan Contractors, 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. Texas, U.S.A. 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. November 6, 1992 5. Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. There has been no business transacted in Florida as yet.
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))

7. 2422 Green Rock Road
Houston, Texas 77032
(Current mailing address)

8. General contractor for projects located in Florida.
(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:

Office Address:

Phyllis J. Cobb
161 John Ringling Blvd. (A-5)
Sarasota, Florida, 34236
(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.

Phyllis J. Cobb
(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.

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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: Stacy Roberts

Address: 7630 Carl Road Extension

Spring, Tx. 77032

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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

President: Stacy Roberts

Address: 7630 Carl Road Extension

Spring, Tx. 77373

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. 

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

14. Stacy Roberts President

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



The State of Texas

SECRETARY OF STATE

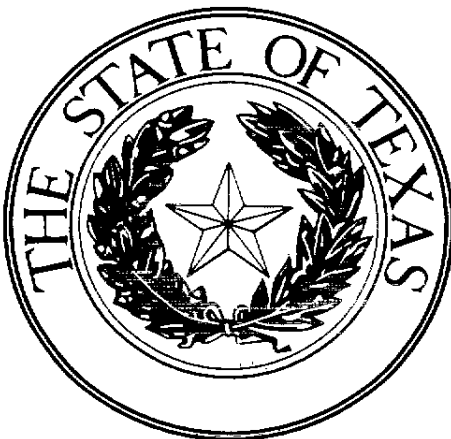
IT IS HEREBY CERTIFIED that
Articles of Incorporation of

AFFILIATED METROPOLITAN CONTRACTORS, INC.
File No. 1249838-0

were filed in this office and a certificate of incorporation was issued to this corporation,
and no certificate of dissolution is in effect and the corporation is currently in existence.

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*IN TESTIMONY WHEREOF, I have hereunto
signed my name officially and caused to be
impressed hereon the Seal of State at my office in
the City of Austin, on January 12, 1998.*



Alberto R. Gonzales
Secretary of State

DEE