TO: QUALIFICATION/TAX LIEN SECTION DIVISION OF CORPORATIONS

600002453656---1 -03/11/98--01053--002 *****78.75 ******78.75

SUBJECT: Imagery Coeative Ofice, Entertainment Enc.
(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:

W98-5464

- TCO Extertaintum 7.0. Box 621352 Dolando EC 32862	
(City, State and Zip Code)	

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

(Name of Person)

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 Sec. Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 11, 1998

ICO ENTERTAINMENT PO BOX 621352 ORLANDO, FL 32862

SUBJECT: IMAGERY CREATIVE OFFICE, ENTERTAINMENT INC.

Ref. Number: W98000005464

We have received your document for IMAGERY CREATIVE OFFICE, ENTERTAINMENT INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please list the street address of each officer/director. If the officer/director does not have a street address, list a P.O. Box and write (N/A) beside the box number.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers Document Examiner

Letter Number: 998A00013321



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 19, 1998

ICO ENTERTAINMENT PO BOX 621352 ORLANDO, FL 32862

SUBJECT: IMAGERY CREATIVE OFFICE, ENTERTAINMENT INC.

Ref. Number: W98000005464

We have received your document for IMAGERY CREATIVE OFFICE, ENTERTAINMENT INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

You neglected to make a correction requested in our previous letter, a copy of which is attached. Please list the street address of each officer/director. If the officer/director does not have a street address, list a P.O. Box and write (N/A) beside the box number.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers Document Examiner

Letter Number: 698A00014842

3/23 called re: refund; changed mind. Don't refund.

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

٠...

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:
(Name of corporation: must include the word "NCORPORATED", "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. Willwington) = 3. 59-3437187 (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. (Data of Incorporation) 5. ———————————————————————————————————
6. (Date first transacted business in Florida. (See sections 807.1501, 607.1502, and 817.155, F.S.) 7. (O. Sox (O. Z. 35.2 (40.7) 28.2-08.09.)
Octando FC 32862 (Current inalling address)
8. (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: Ayou taylite Office Address: 5547 GatCin AD Switt 5 32812
OKando FC, Florida, (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.

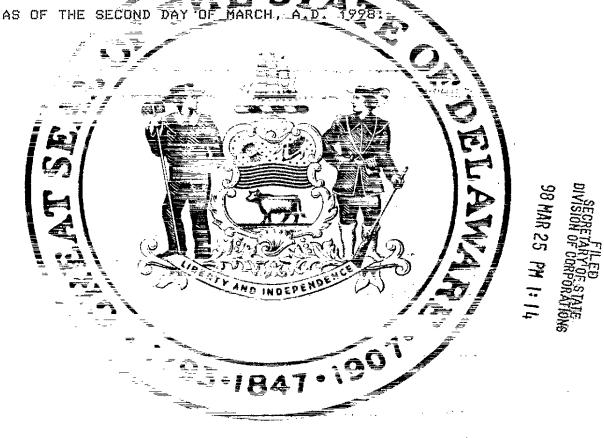
(Registered agent's signature)

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:	
A. DIRECTORS	W 207 - ND
Chairman: Tayou layue (46	r) 280 y
Address: 20. 80x 621352	
/ OrCando € € 32862	
Vice Chairman:	787-10
Address: 7:0: 50 62/352	_ <u>_</u>
Or Cardo FC V186	
Director:	- 25
Address: 1712 Golden Yopey ct.	- P
Orlando FU 32824	- ORAT
Director:	- IF ONS
Address:	
B. OFFICERS	• • • • • • • • • • • • • • • • • • • •
President TayAT	
Address: 2 1717	Colden Poppy ot
04 2 3242	Colden Poppy ct Drando FC 32024
Vice President: Sue Seters.	
Address: 20 621352	
Out 27867	· · · · · · · · · · · · · · · · · · ·
Secretary:	86 8510 810
Address:	A STEVE
	25 25 E
Treasurer:	7 P P P P P P P P P P P P P P P P P P P
 	
Address:	TONE ATTE
NOTE: If necessary, you may attach an addendum to the application	— ∞ listing additional officers
and/or directors.	as and additional concess
Junou faille	•
13. Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the appropriate to the property of the propert	oplication)
14. The description of a second strains application	
(Typed or printed name and capacity of person signing application)	

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IMAGERY CREATIVE OFFICE, ENTERTAINMENT 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,



Edward J. Freel, Secretary of State 8948033

AUTHENTICATION:

03-02-98

981079737

2850669

DATE: