Qualification/Tax Lien Section To: Division of Corporations a Services, SUBJECT: (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: (Name of Person) Firm/Company) (Address) 900002477949-Should you need to call someone concerning this matter, please call:

(Name of Person) at (69, 486-7657)

(Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Section 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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 3, 1998

RALPH WEBER
WEBER CAFETERIA SERVICES, INC.
12600 STOWE DR., #3
POWAY, CA 92064

SUBJECT: WEBER CAFETERIA SERVICES, INC.

Ref. Number: W98000007503

We have received your document for WEBER CAFETERIA SERVICES, 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 487-6093.

Letter Number: 098A00017917

Freta Lott Corporate Specialist Supervisor

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIA REGISTER A	NCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FULLOWING IS SUBMITTED TO FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
	Weber Cafeteria Services, INC.
words or ab	orporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or observiations of like import in language as will clearly indicate that it is a corporation instead of a son or partnership if not so contained in the name at present.)
2	untry under the law of which it is incorporated) 3. 95-4302749 (FEI number, if applicable)
4	(Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")
6	12698
(Date 7.	first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
	POWAY CA 92064
8(Purp	(Current mailing address) Cafetera Soverment Buildings cose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and	street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name	Ralph Weber
	MIAMI, Florida, 33/66 (Zip code)
10. Register	ed agent's acceptance:
in this applica comply with th	named as registered agent and to accept service of process for the above stated corporation at the place designated ation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with a 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: (Street address ONLY - P.O. Box NOT acceptable) A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chairman: Address: Vice Chairman: Address: ____ Director: Address: Director: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: RALPH WEBER POWRY CA 92064 Vice President: Address: Secretary: MARIA

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Secretary: MARIA WEBER

Address: 14945 AMSO STREET

FOWAY CA 92069

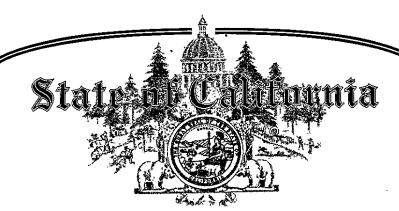
Treasurer:

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



SECRETARY OF STATE

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BILL JONES, Secretary of State of the State of California, hereby certify:

That on the 3rd day of January ,1991

WEBER CAFETERIA SERVICES, INC.

became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

March 2, 1998

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Secretary of State