

F98000002246

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: International Imaging Associates 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:

NEIL SAVIN  
(Name of Person)  
International Imaging Associates Inc.  
(Firm/Company)  
6773 DUPERE Lane  
(Address)  
LAKE WORTH FL 33467  
(City/State/Zip)

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

98 APR 20 AM 9:24

FILED  
4/21

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

200002493572--6  
-04/20/98--01059--008  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

NEIL SAVIN at (561) 432-1050  
(Name of Person) (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

**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. INTERNATIONAL IMAGING ASSOCIATES INCORPORATED  
(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. STATE of NEVADA U.S.A. 3. 88-0381093  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/23/97 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Waiting for Authorization to do so.  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 6773 DUPERE LANE  
LAKE WORTH FL 33467  
(Current mailing address)

8. TRYING to establish + expand EXPORT PART of business  
(Purpose(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: NEIL SAVIN

Office Address: 6773 DUPERE LANE  
LAKE WORTH, Florida, 33467  
(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.*

Neil Savin  
(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.

FILED  
98 APR 20 AM 9:25  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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: NEIL SAVIN

Address: 6773 DUPERE Lane  
LAKE WORTH FL 33467

Vice Chairman: ~~\_\_\_\_\_~~

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

Director: GAIL ZUCKERMAN

Address: 6773 DUPERE Lane  
LAKE WORTH FL 33467

Director: HARRIS P. SAVIN

Address: 6773 DUPERE Lane  
LAKE WORTH FL 33467

FILED  
98 APR 20 AM 9:25  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

President: NEIL SAVIN

Address: 6773 DUPERE Lane  
LAKE WORTH FL 33467

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

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

Secretary: GAIL ZUCKERMAN

Address: 6773 DUPERE Lane  
LAKE WORTH FL 33467

Treasurer: NEIL SAVIN

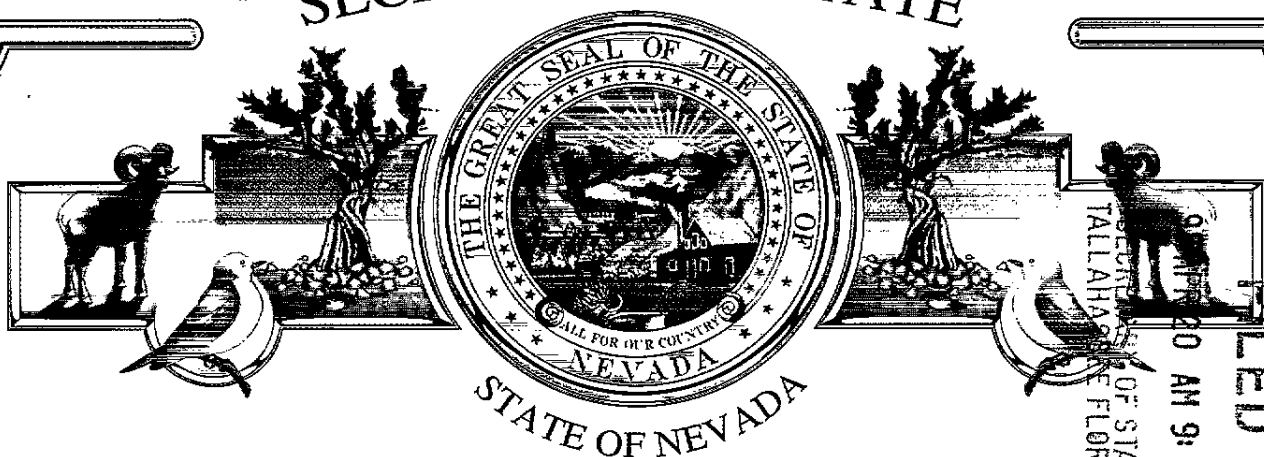
Address: 6773 DUPERE Lane  
LAKE WORTH FL 33467

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

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

14. CHAIRMAN + PRESIDENT + TREASURER  
NEIL SAVIN  
(Typed or printed name and capacity of person signing application)

# SECRETARY OF STATE



FILED  
APR 20 AM 9:25  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **INTERNATIONAL IMAGING ASSOC., INC.** as a Corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since DECEMBER 23, 1997, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Las Vegas, Nevada, on April 10, 1998.



*Dean Heller*  
Secretary of State  
By *[Signature]*  
Certification Clerk