F9800000000000440

TO: Qualification/Tax Lien Section Division of Corporations

3000002477313-0-4 -04/02/98-01094-001 ******70.00 ******70.00

SUBJECT: TRANSIT IMAGE, INC.

(Name of corporation - must include suffix)

Dear Sir or Madam:

300002477313--4 -04/29/98--01099--001 ***1150.00 ***1150.00

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:

DAVID P SULLIVAN, CPA			
(Name of Person)	035	98	
SULLIVAN AND FOLAN, CPA'S	ART.	APR :	77
(Firm/Company)	ASSE ASSE	29	Carlos and
220 FORBES ROAD, SUITE 305		<u>-</u> 0 -M	
(Address)	NO.	င္မာ	
BRAINTREE, MA 02184	ORIDA	သ္	
(City/State/Zip)			

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

DAVID P. SULLIVAN, CPA

at 781-849-6060

(Name of Person)

(Area Code & Daytime Telephone Number)

COURIER ADDRESS:

MAILING ADDRESS:

798-7440

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399 Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

A JAPR 29 998

STF FL32376F.2



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

April 3, 1998

DAVID P. SULLIVAN, CPA SULLIVAN AND FOLAN, CPA'S 220 FORBES ROAD, SUITE 305 BRAINTREE, MA 02184

SUBJECT: TRANSIT IMAGE, INC. Ref. Number: W98000007440

We have received your document for TRANSIT IMAGE, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$1150.00.

Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a sworn affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501 or 617.1501, Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 487-6094.

Agnes Lunt **Document Specialist** Letter Number: 998A00017817

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



Certified Public Accountants

Business Consultants

98 APR 29 PM 3: 35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 23, 1998

Agnes Lunt Document Specialist Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE:

Transit Image, Inc.

Ref. Number: W98000007440

Dear Ms. Lunt:

Enclosed please find a check in the amount of \$1,150 for Transit Image, Inc., per your request.

Should you need any further information, please feel free to contact me.

Sincerely,

David P. Sullivan

Certified Public Accountant

DPS:jb

Enclosure

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. TRANSIT IMAGE, INC.	
(Name of corporation: must include the word "INCORPORAT of like import in language as will clearly indicate that it is a c contained in the name at present.)	ED", "COMPANY", "CORPORATION" or words or abbreviations or poration instead of a natural person or partnership if not so
contained in the name at present.)	
2. DELAWARE	3. 04-2994819
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. 1-18-88	5. PERPETUAL
(Date of Incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. 1-11-97	<u> </u>
(Date first transacted business in Florida. (SEE S 7. 35 CHIEFS WAY P.O. BOX 1409	
7. 33 CHIEFS WAT 1.0. BOX 1403	
RANDOLPH MA 02368-4222	3: 3: 10RA 3:
(Current m	nailing address)
8. SERVICE	
(Purpose(s) of corporation authorized in home sta	ate or country to be carried out in the state of Florida)
9. Name and street address of Florida registered ag	ent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: C T CORPORATION SYSTE	<u>M</u>
Office Address: 1200 SOUTH PINE	ISLAND ROAD
PLANTATION	, Florida, 33324
	(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. Ifurther 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) A SST. SECRETARY

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.

A. DIRECTORS (Street address only- P. O. Box NOT acceptable) Chairman: Address: _____ Vice Chairman: _____ Address: Director: ROBERT E. KEATING 65 WINDY HILL ROAD Address: COHASSET, MA 02025 WILLIAM H. BURKE Director: 264 ALLERTON COMMON Address: BRAINTREE, MA 02184 B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: ROBERT E. KEATING Address: 65 WINDY HILL ROAD COHASSET, MA 02025 Vice President: Address: Secretary: AUSTIN W. BURKE Address: ____ 46 MAYFLOWER ROAD BRAINTREE, MA 02184 Treasurer: ____ WILLIAM H. BURKE 264 ALLERTON COMMON, BRAINTREE MA 02184 Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14 ROBERT E. KEATING PRESIDENT (Typed or printed name and capacity of person signing application)

. 12. Names and addresses of officers and/or directors: (Street address ONLY-P. O. Box NOT acceptable)

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "TRANSIT IMAGE, 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, AS OF THE TWENTY-SEVENTH DAY OF
FEBRUARY, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TRANSIT IMAGE, INC." WAS INCORPORATED ON THE EIGHTEENTH DAY OF JANUARY, A.D. 1988.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

98 APR 29 PM 3: 36
SECREJARY OF STATE
TALLAHASSEE, FLORIDA

1841



Edward J. Freel, Secretary of State

AUTHENTICATION:

8945816

DATE:

02-27-98

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