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TO: DIVISION OF CORPORATIONS FAX #: (850)922-4000

FROM: BUSINESS FILINGS ACCT#: 105256001620
CONTACT: RICHARD OSTER
PHONE: (608)251-6600 FAX #: (608)251-6907

NAME: INTERFINANCE Ltd. Inc.
AUDIT NUMBER.....H98000008444
DOC TYPE.....FOREIGN PROFIT QUALIFICATION
CERT. OF STATUS..1 PAGES ... 2
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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. Name of Corporation: Interfinance Ltd. Inc.
2. State or Country under the law of which it is incorporated: WY
3. FEI number, if applicable:
4. Date of Incorporation: 6/25/97
5. Duration: Year corp will cease to exist or "perpetual": perpetual
6. Date first transacted business in Florida: date of filing.
7. Current mailing address: 3001 Ponce De Leon, Suite 264, Coral Gables, FL 33134
8. Purpose of corporation authorized in home state or country to be carried out in the state of Florida:
Financing.
9. Name and street address of Florida registered agent:

Name: Business Filings Incorporated
Office address: 1186 Ocean Shore Blvd., Suite 195, Ormond Beach, FL 32176

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.

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12. Names and addresses of officers and/or directors

A. DIRECTORS

Director: Gerardo Rodriguez
Address: 3001 Ponce De Leon, Suite 264, Coral Gables, FL 33134

B. OFFICERS

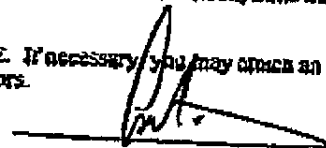
President: Gerardo Rodriguez
Address: 3001 Ponce De Leon, Suite 264, Coral Gables, FL 33134

Vice President: Gerardo Rodriguez
Address: 3001 Ponce De Leon, Suite 264, Coral Gables, FL 33134

Secretary: Gerardo Rodriguez
Address: 3001 Ponce De Leon, Suite 264, Coral Gables, FL 33134

Treasurer: Gerardo Rodriguez
Address: 3001 Ponce De Leon, Suite 264, Coral Gables, FL 33134

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

12. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
13. Gerardo Rodriguez, President
(Typed or printed name and capacity of person signing application)

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State of Wyoming

Office of the Secretary of State

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United States of America, }
State of Wyoming } ss.

I, DIANA J. OHMAN, Secretary of State of the State of Wyoming, do hereby certify that according to the records in the office of the Secretary of State of Wyoming, INTERFINANCE LTD. is a corporation organized under the laws of the State of Wyoming, whose date of incorporation is 06/25/1997; and whose period of duration is perpetual.

I FURTHER CERTIFY that this corporation has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and that Articles of Dissolution have not been filed, thus making the corporation in existence in the State of Wyoming.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Wyoming Done at Cheyenne, the Capital, this 29th day of April A.D., 1998.

Diana J. Ohman
Secretary of State

By *[Signature]*

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