TRANSMITTAL LETTER

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	ification/Tax Lien Section sion of Corporations	^			
	PRODUCT DE	VELOPHENT RE	SEARCH,	INC.	
SUBJECT:	(Name of c	orporation - must include suffix	:)		
Dear Sir or N	_				
"Certificate	i "Application by Foreign Corporate Existence", and check are subm	ation for Authorization to Trans nitted to register the above refer	act Business in I enced foreign cor	florida", rporation to	
transact busi	ness in Florida.				
Please return	all correspondence concerning th		000258 -4)7/06/98		
	William	(Name of Person)	*****78.7	5 *****78.°	75
		(Name of Person)			
	PRODUCT DEVE	CHOPMENT RESEARCE	H, INC.	·	÷
	531 BOCA Cie	GA POINT BLUD. (Address)	NORTH		
	ST. PETERS BU	City/State/Zip)	708		- 397
Should you	need to call someone concerning	this matter, please call:	U Fe	,098-15 g.619	
Willie (N	at lame of Person)	(813) 319-66 (Area Code & Daytime Te	lephone Number	, A.	1/13/2
COURIER	R ADDRESS:	MAILING ADDR	ŒSS:	SECRET	
Division of 409 E. Gai	on/Tax Lien Section f Corporations nes St. e. FL, 32399	Qualification/Tax Division of Corpor P.O. Box 6327 Tallahassee, FL 3:	rations 🖽 🖂		-

Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 7, 1998

WILLIAM LIT PRODUCT DEVELOPMENT RESEARCH, INC. 531 BOCA CIEGA POINT BLVD., NORTH ST. PETERSBURG, FL 33708

SUBJECT: PRODUCT DEVELOPMENT RESEARCH, INC.

Ref. Number: W98000015397

98 JUL 13 AM II: 17
SECRETARY OF STATE
SECRETARY OF STATE

We have received your document for PRODUCT DEVELOPMENT RESEARCH, 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:

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: 298A00036288

Fax: 727 319 6600

AFFIDAVIT

On this day personally appeared before me, the undersigned officer duly authorized to administer of take acknowledgements

(Officer name)

who after having first been duly sworn, upon oath deposes and says as follows:

1. I am PRESIDENT of PRODUCT DEVELOPMENT RESEARCH, INC. (carporation name)

2. The "Application by Foreign Corporation for Authorization to Transact Business in Florida", submitted to the Florida Department of State, contained erroneous information.

3. PRODUCT DEVELOPMENT RESEARCH, THE has not transacted business in (corporation name)

the State of Florida. The date of 1997 as stated in section six (6) of its application is erroneous. The previous activities conducted within the State of Florida by said corporation did not constitute the transaction of business pursuant to section 607.1501,

4. The correct date the corporation shall begin conducting its affairs in Florida shall be upon qualification by the Florida Department of State.

98. William Set

On this day of fully personally appeared before the,

Florida Statutes.

who is personally known to me

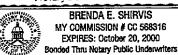
whose identity I proved on the basis of _

My Commission Expires:

Beenda De Notary Riblic Signature

Netary's Printed Name

Seal



APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT

APPLICATION BY POICE	BUSINESS IN FLORED
	TO STRMITTED IV
	03, FLORIDA STATUTES, THE FOLLOWING IS SOLIDATED TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
TANCE WITH SECTION 607.13	TO THE ANSACT BUSINESS IN THE STATE OF THE
COMPLIANCE "IZZO CORPORATION"	O TRAINSACE -
GISTER A PURISAGE	CENTER OF OF
Opposed DE	d "INCORPORATED", "COMPANY", "CORPORATION of a "INCORPORATED", "COMPANY", "CORPORATION of a guage as will clearly indicate that it is a corporation instead of a guage in the name at present.)
tinclude the WO	d "INCORPORATED",
Name of corporation; must include the	guage as will clearly manager)
(Name of corporation; must include words or abbreviations of like import in lar natural person or partnership if not so contractions.)	nined in the name at present,
netural person or partnership if not so con-	24 84 8
V-00 RTK	(FEI number, if applicable)
NEW YORK Stick!	is incorporated)
(State of country under the law of which it	PERPE VAL
(State of County)	5
9/7/7/	(Duration: Year corp. Will
(Date of incorporation)	is incorporated) FER PET VA L (Duration: Year corp. will cease to exist or "perpetual")
(Date of -	lorida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
. 1997	Norda.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) NOCA CIRCH POINT BLUD. NORTH (Current mailing address)
6 Fort transacted business in F	onda, (Sissi De T. B. UD. NORIT
(Date first transactor)	ON CIRCH POINT DES
.531 <u>5</u>	22708
7	TENGBURG. FL.
ST. Pe	iling address)
	(Current maning and very
	the state of the s
~ 1:	rized in home state or country to be carried out in state of Florida)
CONSUL	A state of country to be carried out in state of 1 to 12
8samoration author	da registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
(Purpose(s) of corporation	(P.O. Box of Mail Drop Box NOT according to
-	The state of the s
9 Name and street address of 2	Litt SER Ciega M.BL. N. JER BURG, Florida, 33708 (Zip code) (Zip code)
1.4.111001	
Name:	AT BY N.
Ca. B	ER CLEAR THE
3/	23708
Office Address.	Florida, DE
ST. FE	(Zip code)
	Litt CA Ciega PT.BL. N. JER BURG, Florida, 33708 (Zip code) (Zip code)
	: nt and to accept service of process for the above stated corporation at the place designated e appointment as registered agent and agree to act in this capacity. I further agree to e appointment as registered agent and agree to act in this capacity. I further agree to let the proper and complete performance of my duties, and I am familiar with
10. Registered agent's acceptance	
10. 108.55	nt and to accept service of process for the above stated corporation at the place designment and to accept service of process for the above stated corporation at the place designment as registered agent and agree to act in this capacity. I further agree to exposint a proper and agent and agent agent.
t am named as registered age	nt and to accept service of process for the above stated in this capacity. I further agree to eappointment as registered agent and agree to act in this capacity. I further agree to eappointment as registered agent and complete performance of my duties, and I am familiar with the state of the proper and complete performance of my duties, and I am familiar with the state of the proper and complete performance of my duties, and I am familiar with the state of the proper and complete performance of my duties, and I am familiar with the state of the proper and complete performance of my duties, and I am familiar with the state of the proper and complete performance of my duties, and I am familiar with the state of the proper and complete performance of my duties, and I am familiar with the state of the proper and complete performance of my duties, and I am familiar with the state of the proper and complete performance of my duties, and I am familiar with the state of the proper and complete performance of my duties, and I am familiar with the state of the proper and complete performance of my duties, and I am familiar with the state of the performance of my duties.
Having been hamou hereby accept th	e appointment as the premer and domplete performance of the
in this applications, of all state	ites relative to the post
in this application, in this application, comply with the provisions of all state and accept the obligations of my posi-	tion as registered agonic
and accept the obligations	
•	
	(Registered agent's signature)
	than 90 days prior to delivery of this application under the law
· · · · · · · · · · · · · · · · · · ·	once duly authenticated, not more quetody of corporate records in the jurisdiction
11 Attached is a certificate of exist	ence duly authenticated, not more than of corporate records in the jurishouse of state or other official having custody of corporate records in the jurishouse of the corporate records in the corporate
11. Attached is a certificate of exist Department of State, by the Secretar	(Registered agent's signature) ence duly authenticated, not more than 90 days prior to delivery of this application to the year of State or other official having custody of corporate records in the jurisdiction under the law 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)	e)
A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	√ →
(31:	
Address: S31 BOCA CIEGN POINT BLUD. NORTH	
64 VETERS FORE 612 . 22 PB	
$\frac{1}{\rho}$ ρ ρ ρ	
Vice Chairman: 600 BOOKA CLIEBY POINT BLUB. NORTH	
Vice Chairman: NOSALMD 1- Address: S3 BOBA Ciega POINT BLUB. NORTH ST. PESSES BURG, PL 33708 Director: LAWRENCE Litt	
- Stores Litt	
Address:	
Address: 16 R 24 SU- HUNTRIGTON, STATION, N.Y. 11746	
Director:	
Address:	
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	
B. OFFICERS (Street address only -1.5. Box 7.5.	SEC
President: William Litt	AHA I
Address:S31 BOCA Cirega PT.BL.N.	SSR W
ST-PETERS BURG, PL. 33708	FFS II U
Vice President: ROSALIND R-LiTT	III 8
Address:	<u> </u>
ST. PETENSONS, PL. 35708	
Secretary: > LAWRENCE Litt	
The anot and street	
Address: HUNTING TON STATION, N.Y. 11746	
Treasurer:	
Address	
· licting additional officers an	d/or directors.
NOTE: If necessary, you may attach an addendum to the application listing additional officers an	
13(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the	application)
william litt. WRRSIDENI	
14(Typed or printed name and capacity of person signing applicat	ion)

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State of New YorkDepartment of State

I hereby certify, that the certificate of incorporation of PRODUCT DEVELOPMENT RESEARCH, INC. was filed on 09/07/1977, with perpetual duration, and that a diligent examination has been made of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

OF Midety-eight.

The Corporation Biennial Statement is past due.

Witness my hand and the official seal of the Department of State at the City of Albany, this 27th day of May one thousand nine hundred and

Secretary of State

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98 JUL 13 AM 11: 18
SECRETARY OF STATE
TALLAHASSEF FINALE