798000004118

To: Qualification/Tax Lien Section **Division of Corporations** ERVICE AND TECHNOLOGIES INTERNATIONAL, INC. (Name of corporation - must include suffix) 100002584841--07/10/98--01020--002 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. w98-15694 Please return all correspondence concerning this matter to the following: Utility SERVICE AND TECHNOLOGIES INTERNATIONAL, INC. (Firm/Company) ountainebleau Blud. #D-422 (Address) Should you need to call someone concerning this matter, please call: at (305) 229-704 (Area Code & Daytime Telephone Number) **COURIER ADDRESS: MAILING ADDRESS:** Qualification/Tax Lien Section Qualification/Tax Lien Section Division of Corporations Division of Corporations 409 E. Gaines St. P.O. Box 6327

Tallahassee, FL 32314

Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 10, 1998

NICOLAS R. ESTAVA UTILITY SERVICE AUTOTECHNOLOGIES INTERNA 9357 FOUNTAINEBLEAU BLVD. #D-422 MIAMI, FL 33172

SUBJECT: UTILITY SERVICE AND TECHNOLOGIES INTERNATIONAL, INC.

Ref. Number: W98000015694

We have received your document for UTILITY SERVICE AND TECHNOLOGIES INTERNATIONAL, 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):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this 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) 487-6095.

Jennifer Sindt Document Examiner

Letter Number: 598A00036958

DIVISION OF CHAPTON 2:58

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

N COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
(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. Mississippi, USA (State or country under the law of which it is incorporated) 3. 6408 21077 (FEI number, if applicable)
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. (Date of incorporation) 5. PERPETUA ((Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 507 Colonial Circle, STARKVILLE, MS 39759
9 01
(Current mailing address)
8. GENERAL BUSINESS (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
(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: Nicolas ESTAVA, Je
Office Address: 9357 Fountaineblean Blud# D-422
MIAMI, Florida, 33/72 (Zip code)
(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.
(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	s and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)	
A. DIREC	CTORS (Street address only - P.O. Box NOT acceptable)	
Chairman:		
Address: _		
_		
Vice Chair	man:	<u> </u>
Address:	9	
•		
Director:		<u> </u>
Address:		
,		
	CERS (Street address only - P.O. Box NOT acceptable)	
President:	Nicolas ESTAVA M.	-
Address:	507 Colonial CIRCLE, StarkvillE, MS39759	
Vice Presi	dent: NICOLAS ESTAVA, JR.	
Address:	9357 fountainebleau Blvd. # D-422	<u>.</u>
	Miami, FL 33172	
Secretary:	JEHNIFER E. Aloisi	
Address:		
Tracenter	SUSAN W. ESTAVA	
	507 Colonial Cincle, STARKVILLE	-
Address:	MS, 34759	
	/	
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)	
1.4	NICOLAS ESTAVA, JR - VICE-PRESIDENT.	
14	(Typed or printed name and capacity of person signing application)	

State of Mississippi

Secretary of State's Office Eric Clark

Secretary of State Jackson, Mississippi

CERTIFICATE OF EXISTENCE/AUTHORITY

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on January 18,1989 the state of Mississippi issued a Charter/Certificate of Authority to:

UTILITY SERVICE AND TECHNOLOGIES INTERNATIONAL, INC

That the state of incorporation is MISSISSIPPI.

THAT THE PERIOD OF DURATION IS 99 YEARS.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

TARY OF STATE OF STAT

Given under my hand and seal of office May 12,1998

ERIC CLARK, Secretary of State