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Qualification/Tax Lien Section

TO:

Division of Corporations MANAGEMENT APPLIED PROGRAMMING, INCORPORATED SUBJECT: (Name of corporation - must include suffix) 800002614458 08/13/98--01010--003 Dear Sir or Madam: ***131.25 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. W98-1845/ Please return all correspondence concerning this matter to the following: HERBERT SCHAFFER (Name of Person) MANAGEMENT APPLIED PROGRAMMING, INCORPORATED (Firm/Company) 3415 SO. SEPULVEDA BL., #200 (Address) LOS ANGELES, CA 90034 (City/State/Zip) Should you need to call someone concerning this matter, please call: 8:00 AM- 4:30 PM HERBERT SCHAFFER area code-310- at (397-7220 (Area Code & Daytime Telephone Number) (Name of Person)

COURIER ADDRESS:

Qualification/Tax Lien Sec. 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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 13, 1998

HERBERT SCHAFFER MANAGEMENT APPLIED PROGRAMMING, INC. 3415 SO. SEPULVEDA BLVD., #200 LOS ANGELES, CA 90034

SUBJECT: MANAGEMENT APPLIED PROGRAMMING, INC.

Ref. Number: W98000018451

We have received your document for MANAGEMENT APPLIED PROGRAMMING, INC. and your check(s) totaling \$131.25. However, the document has not been filed and is being retained in this office for the following:

You have submitted a certified copy of the corporation's articles. What we require for our filing purposes is a certificate of existence or good standing.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Letter Number: 098A00042141

Jennifer Sindt Document Examiner SECRETARY OF STATIONS



3415

August 28, 1998

South Sepulveda

Boulevard

Suite 200

Los Angeles

Ms. Jennifer Sindt Florida Dept. of State

California

Div. of Corporations PO box 6327

Tallahassee, Fl 32314

90034+6035

Tele: 310-397-7220

Fax: 310-398-6105

Re: TPA Filing

Dear Ms. Sindt:

Please find enclosed the document requested, along with a copy of your letter. Feel free to call or write if you need anything further.

Sincerely,

Ted Siegel,

Front Office

30 :01 WHO: OE

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.	MANAGEMENT APPLIED PROGRAMMING,	INC.				
••	(Name of corporation: must include the word "INCORPORA" words or abbreviations of like import in language as will clean natural person or partnership if not so contained in the name	rly indicate that	NY", "CO	ORPORATION poration instea	N" or d of a	
2.	CALIFORNIA		3.	3-2501278	-	-
	(State or country under the law of which it is incorporated)		(FEI nui	nber, if applic	able)	
4.	MAY, 17, 1968		5.	PERPETUAL		
	(Date of Incorporation)	(Duration: Ye "perpetu	ear corp. w	vill cease to ex	ist or	
6.	NOT CURRENTLY TRANSACTING BUSINESS	-			-	
	(Date first transacted business in Florida. (SEE SECTIONS	607.1501, 607.1	502, AND	817.155, F.S.)		
7.	MANAGEMENT APPLIED PROGRAMMING					
	3415 SEPULVEDA BL., #200, LOS ANGELES,	CA 190034			ည	DIV
	(Current mailing a	ddress)			_8_	<u>-88</u>
8.	CERTIFICATE OF AUTHORITY				JG 31	RETAR
	(Purpose(s) of corporation authorized in home state or coun	try to be carried	out in the	state of Florid	a) 🛌	
9.	Name and street address of Florida registered ag acceptable)	ent: (P.O. Be	ox or Ma	ail Drop Bo	80 VÕI	FORAT
	Name: CT CORPORATION SYSTEM		-	•	&	NO.
	Office Address: 1200 S. PINE ISLAN	ID ROAD	·			
	PLANTATION		<u> </u>	, Florida	3333	24
10	. Registered agent's acceptance:			(Zip	Code)	
coi reg all	tving been named as registered agent and to ac rporation at the place designated in this applic gistered agent and agree to act in this capacity. I statutes relative to the proper and complete perfe d accept the obligations of my position as registere	cation, I her further agree ormance of n	reby acc e to com	ept the ap plath the pr	pointm ovision	nent as ns of
	DA Freis	7				
	(Registered agent's s	ignature) /				

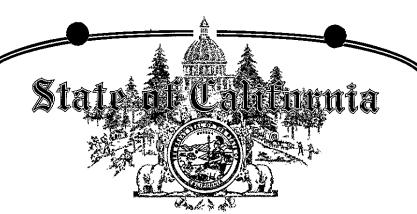
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is

incorporated.

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

A. DIRECTORS (Street address only- P. O . Box NOT acceptable)

XCXXXXXXX DIRECTOR: FURROKH NARIMAN DASTUR						
Address:3415 S. SEPULVEDA BL., #200, LOS ANGELES, CA 90034						
VICE CHRIMAN AND IRECTOR: PHIROZE HORMUSJI DALAL	- 					
Address: 3415 S. SEPULVEDA BL., #200, LOS ANGELES, CA 90034	v					
Director:	••• ·					
Address:	- Mate					
ROBERT BASSIN						
Director:						
Address: 3415 S. SEPULVEDA BL., #200, LOS ANGELES, CA 90034	* ** *** ***					
B. OFFICERS (Street address only- P. O. Box NOT acceptable)	 DIV					
President: FURROKH NARIMAN DASTUR FURROKH	SECR /ISIO					
Address: 3415 S. SEPULVEDA BL., #200, LOS ANGELES, CA 90034						
EXECUTIVE Vice President: WAYNE L. HAYS						
Address: 3415 S. SEPULVEDA BL., #200, LOS ANGELES, CA 90034	ATE					
VICE PRES:/TREASURER/						
Secretary: PHIROZE HORMUSJI DALAL						
Address: 3415 S. SEPULVEDA BL., #200, LOS ANGELES, CA 90034	s to the second					
VICE PRESIDENT: HORMAZI PHIROZE DALAL - 3415 S. SEPULVEDA BL., 3200, LC	S ANGEGELES CA., 90034					
TREASURER: VICE PRESIDENT: HERBERT SCHAFFER	-,-					
Address: 3415 S. SEPULVEDA BL., #200, LOS ANGELES, CA 90034						
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)	÷					
HERBERT SCHAFFER						
(Typed or printed name and capacity of nerson signing application)						



SECRETARY OF STATE

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BILL JONES, Secretary of State of the State of California, hereby certify:

19 68

That on the	7/Ln	day of	MAY		
		•	-	,	٠

MANAGEMENT APPLIED PROGRAMMING, INC.

became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

JUNE 5. 1998

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Secretary of State