

F98000005226

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

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-09/16/98--01071--007

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SUBJECT: First Financial Equities, Inc
(Name of corporation - must include suffix)

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.

Please return all correspondence concerning this matter to the following:

Marvin E. Katz

(Name of Person)

Marc Ben-Ezra P.A.

(Firm/Company)

951 NE 167th St

(Address)

N.M.B. FL 33162

(City/State/Zip)

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

Marvin E. Katz

(Name of Person)

at (305) 970-4100 or 305 652-8080
(Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Section
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

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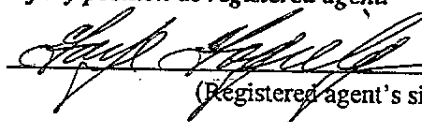
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

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. First Financial Equities Inc.
(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. State of N.Y.
(State or country under the law of which it is incorporated)
3. 133638219
(FEI number, if applicable)
4. 11/5/91
(Date of incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. This corporation Presently Has Not Conducted Business In Florida
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 1600 S. Ocean Drive Suite 15F
Hollywood, FL 33019
(Current mailing address)
8. Mortgage Lender
(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: FAYE FOGIEL GARN
Office Address: 1600 S. OCEAN DR. SUITE 15F
HOLLYWOOD, FL 33019, Florida, 33019
(Zip code)
10. Registered agent's acceptance:

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

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

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: DAVID SADER

Address: 374 WINTHROP ROAD

TEANECK NJ 07631

Vice President: ELLY KRIEGER

Address: 157 BOULEVARD

PASSAIC NJ 07055

Senior Underwriter Secretary: ABE GOLD

Address: 9 SLEVIN COURT

MONROE NY 10952

Treasurer: _____

Address: _____

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)

14. DAVID SADER, President

(Typed or printed name and capacity of person signing application)

**State of New York
Department of State**

SS:

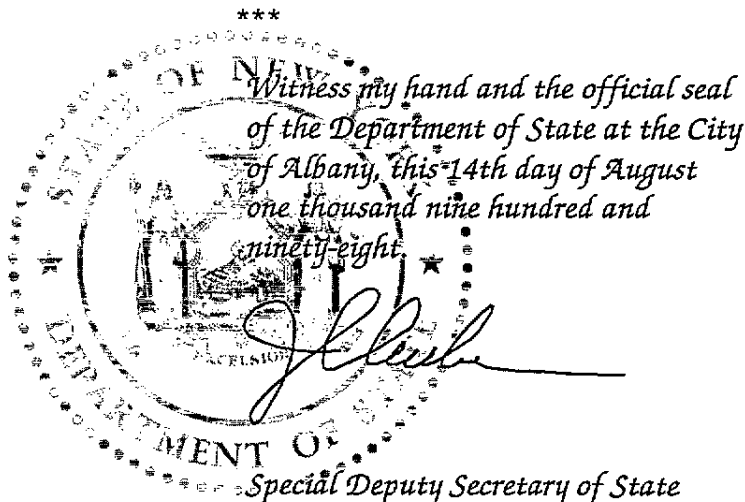
I hereby certify, that the certificate of incorporation of *FIRST FINANCIAL EQUITIES INC.* was filed on 11/05/1991, with perpetual duration, and that a diligent examination has been made of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, 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. I further certify the following:

A Biennial Statement was filed 11/23/1992.

A Biennial Statement was filed 01/20/1994.

A Biennial Statement was filed 08/14/1998.

I further certify, that no other certificates have been filed by such corporation.

Witness my hand and the official seal
of the Department of State at the City
of Albany, this 14th day of August
one thousand nine hundred and
ninety-eight.

Special Deputy Secretary of State

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