For Ovelification Toy Lien Section

TE ANSWET	Lienter 107
To: Qualification/Tax Lien Section Division of Corporations	
SUBJECT: Project Direct (Name of corporate	tion - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to transact business in Florida.	
Please return all correspondence concerning this matt	
RayCoker	*****78.00 *****70.00
	of Person)
_ Project Dire	ct, Inc W99-3274
•	Company)
4523 Azeel	
· .	ldress)
Tampa, Fo	<u> </u>
Chyr	state/Zip)
Should you need to call someone concerning this mat	ter, please call:
	121
Darlene Coker at (813	3,282 1633 AS 5 7/7
(Name of Person) (Ar	ea Code & Daytime Telephone Number
	S 3 =
COURIER ADDRESS:	MAILING ADDRESS:
Qualification/Tax Lien Section	Qualification/Tax Lien Section
Division of Corporations 409 E. Gaines St.	Division of Corporations P.O. Box 6327
Tallahassee, FL 32399	Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 9, 1999...

RAY COKER PROJECT DIRECT, INC. 4523 AZEELE ST. W. TAMPA, FL 33609

SUBJECT: PROJECT DIRECT, INC. Ref. Number: W99000003234

We have received your document for PROJECT DIRECT, INC. and your check(s) totaling \$70.00. 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 \$1,150.00.

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) 487-6958.

Lee Rivers Document Specialist

Letter Number: 299A00005690

March 9, 1999

Florida Department of State Lee Rivers Document Specialist Division of Corporations PO Box 6327 Tallahassee, FL 32314

Ref # W9000003234 -

Dear Mr. Rivers,

This is to let you know that according to the information we received from your department, Project Direct, Inc. doesn't fall into the category of transacting business as a foreign corporation in the State of Florida.

We misunderstood the requirements and included wrong information on the application.

Please go ahead and process our application I the event we begin transacting business in the future. Please consider this notarized document our sworn affidavit.

Thank you,

Ray A. Coker

President and CEO Project Direct, Inc.

ARY OF STATE

PRODUCED PL DR LIC.

JESSICA D. MORILAK
MY COMMISSION # CC 799975
EXPIRIES: May 16, 2000
Bonded Thru Notary Public Underwriters

Jose D. Morrian

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.	Project Direct, 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 or country under the law of which it is incorporated) (FEI number, if applicable)
4.	(State of country limited the law of whiten it is incorporated) (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6.	(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7.	4523 Azeele STW. 30 50 5
	TOMOA FC 33609
	TOMPA FC 336 09 (Current mailing address)
8.	Project Management Consulting of Training (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: Roy Coxer
Oí	fice Address: 4523 Azeele STW.
	TOMPA, FL 33609, Florida, 33609 (Zip code)
10	Registered agent's acceptance:
in co	wing been named as registered agent and to accept service of process for the above stated corporation at the place designated this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to mply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with d 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)	e)		7	
	RS (Street address only - P.O. Box NOT acceptable)		•	•	
Chairman:	RAY A COKER		•		
Address:	4523 Azeele ST W				····
	TOMPA, FL 33609	-			
	Dariene Coker				
Address:	(Same)	<u></u>			
Director:					
Address:					 -
Director:				_	
Address:		. -			<u> </u>
	RS (Street address only - P.O. Box NOT acceptable)				<i>,</i>
President:	RAY A COKET			,	· ··
	(Same)				: . · · ·
Vice President:	_ NA	TALL	99	-	
Address:		CRE AIT	MAR 31		- 1
Secretary:			PM		_
Address:		7.7.1 100 1	+-4		 -
Treasurer:	Darkene Coker		- _V ,	7Æ:	<u> </u>
Address:	Darkene Coker (Same)				· · ± .
				·÷	· =
NOTE: If nec	cessary, you may attach an addendum to the application listing additional officers and/or d	irectors.			
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applications)	cation)	· · · · · · · · · · · · · · · · · · ·		
14	Ray A. Coker, CHairman			- · ·	
	(Typed or printed name and capacity of person signing application)				

Secretary of State

Corporations Division 315 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER :
CONTROL NUMBER :
DATE INC/AUTH/FILED:

K90060779 K629423 09/18/1996 GEORGIA

JURISDICTION PRINT DATE

01/06/1999

FORM NUMBER

211

PROJECT DIRECT, INC. 4523 AZEELE ST. WEST TAMPA FL 33609

MAR 31 PM 12: 11
SECRETARY OF STATE
ALLAHASSEE FLORID

CERTIFICATE OF EXISTENCE

I, Lewis A. Massey, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

PROJECT DIRECT, INC. A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation, or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up, or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

LEWIS A. MASS

SECRETARY OF STATE

