

F99000001816
TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: DENICORP, 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. ALSO, PLEASE PROCESS THE ENCLOSED APPLICATION FOR REGISTRATION OF FICTITIOUS NAME.
Please return all correspondence concerning this matter to the following:

DENIS A. CARAVELLA
(Name of Person)
PRESIDENTIAL REAL ESTATE GROUP
(Firm/Company)
508 S. 12TH AVENUE
(Address)
ST. CHARLES, IL, 60174
(City/State/Zip)

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

300002829310-0
-07/15/99-01103-012
****121.00 ****18.75

SAME at (630) 443-9398
(Name of Person) (Area Code & Daytime Telephone Number)

STREET 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

200002832042--0
4/7/99--01060--01
***70.00 ***70.00

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- ~~\$78.75 Filing Fee & Certificate of Status~~
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

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. DENICORP, 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. ILLINOIS 3. 36-3695816
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. APRIL 12, 1990 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. PENDING APPLICATION APPROVAL
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 508 S. 12TH AVENUE, ST. CHARLES, IL 60174
(Current mailing address)

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8. BROKERING, SELLING, LEASING, OR OTHERWISE DEALING WITH REAL ESTATE
(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)

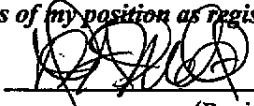
Name: DENIS A. CARAVELLA

Office Address: 5101 N. A1A, APT 206

VERO BEACH, Florida, 32963
(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.


3-29-99
(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: DENIS A. CARAVELLA

Address: 508 S. 12TH AVENUE
ST. CHARLES, IL 60174

Director: _____

Address: _____

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

President: DENIS A. CARAVELLA

Address: 508 S. 12TH AVENUE
ST. CHARLES, IL 60174

Vice President: SAME AS PRESIDENT

Address: SAME AS PRESIDENT

Secretary: SAME AS PRESIDENT

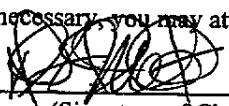
Address: SAME AS PRESIDENT

Treasurer: SAME AS PRESIDENT

Address: SAME AS PRESIDENT

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  3-29-99
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. DENIS A. CARAVELLA, PRESIDENT
(Typed or printed name and capacity of person signing application)



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

DENICORP. INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE APRIL 12, 1990, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS***

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In Testimony Whereof, I, hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 22ND day of MARCH A.D. 1999



Jesse White

SECRETARY OF STATE