





FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

May 19, 1999

ROBERT KAYE  
TRIANGLE ACQUISITION CORP.  
3343 WASHINGTON BLVD  
BALTIMORE, MD 21227

SUBJECT: TRIANGLE ACQUISITION CORP.  
Ref. Number: W99000011695

We have received your document for TRIANGLE ACQUISITION CORP. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

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) 487-6097.

Michael Mays  
Document Specialist

Letter Number: 399A00027657

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
59 JUL 21 PM 2:55

**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. TRIANGLE ACQUISITION CORP.

(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. DELAWARE

(State or country under the law of which it is incorporated)

3. 13-4051619

(FEI number, if applicable)

4. MARCH 4, 1999

(Date of incorporation)

5. \_\_\_\_\_

(Duration: Year corp. will cease to exist or "perpetual")

6. MAY 1, 1999

(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 3343 WASHINGTON BLVD.

BALTIMORE, MD 21227

(Current mailing address)

8. SALE OF SIGNS

(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: ROBERT ALTSHULER

Office Address: 8449 LEGEND CLUB DRIVE

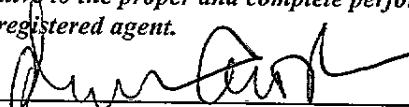
WEST PALM BEACH

, Florida, 33412

(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 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: ROBERT ALTSHULER

Address: 8449 LEGEND CLUB DRIVE

WEST PALM BEACH, FL 33412

Director: ROBERT KAYE

Address: 3511 OLD COURT DRIVE

BALTIMORE, MD 21208

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

President: MARC WEISMAN

Address: 150E 77TH STREET #1019

NEW YORK, NY 10021

Vice President: RONALD PETERS

Address: 25 NORTH WAY

CHAPPAQUA, NY 10514

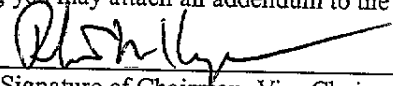
Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

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. Robert M. Kaye Vice President - Director  
(Typed or printed name and capacity of person signing application)

99 JUL 21 PM 2:55  
SECRETARY OF STATE  
DIVISION OF RECORDS & INFORMATION

*State of Delaware*  
*Office of the Secretary of State*

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TRIANGLE SIGN & SERVICE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF JULY, A.D. 1999.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
59 JUL 21 PM 2:55



A handwritten signature in cursive script, reading "Edward J. Freel".

Edward J. Freel, Secretary of State

AUTHENTICATION:

3012265 8300

DATE: 9858589

991281257

07-12-99