TRANSMITTAL LETTER

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To: Qualification/Tax Lien Section Division of Corporations
INNOVATIVE DECISION TECHNOLOGIES, 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:
PRAMID JAIN -08/25/9901039006_
(Name of Person)
ω 99-19925
(Firm/Company)
S578 ETHANS GLEN TERRACE (Address) JACKSUNVILLE, FL 32256-9069
(Address)
JACKSUNVILLE, FL 32256-9069
(City/State/Zip) (City/State/Zip) (City/State/Zip)
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Should you need to call someone concerning this matter, please call:
Should you need to call someone concerning this matter, please call: PRAMOD JAIN
(Name of Person) (Area Code & Daytime Telephone Number)
W. W
STREET ADDRESS: MAILING ADDRESS:
Qualification/Tax Lien Section Qualification/Tax Lien Section
Division of Corporations — Division of Corporations — Division of Corporations
409 E. Gaines St. Tallahassee, FL 32399 Tallahassee, FL 32314
Enclosed is a check for the following amount:
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy

FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 27, 1999

PRAMOD JAIN 8578 ETHANS GLEN TERRACE JACKSONVILLE, FL 32256-9069

SUBJECT: INNOVATIVE DECISION TECHNOLOGIES, INC.

Ref. Number: W99000019925

We have received your document TECHNOLOGIES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

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

Michael Mays Document Specialist

Letter Number: 999A00042971

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 THE STAT
1. Apparation (lecter 1)
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly in little of the control of the
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.)
the matter at present.)
2. (State or country under the law of 11111111111111111111111111111111111
to the law of which it is incorporated)
4. JANUARY 18, 1995 (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
(Date of incorporation) 5.
6WOT YET (Duration: Year corp. will cease to exist or "perpetual")
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
1 - 10 ELHANS GIEN TERRING
JACKSONVILLE, FL 32256-9069
(Current mailing address)
8. CONSULTING SERVICES AND SOFTWARE PRODUCTS
(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 and the state of
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: TRAINIOD JAIN
Office Address: 8578 ETHANS GLEN
JACKSONVILLE, FL 32256, Florida, 32256-9069
Florida, 52156-9069
(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 with the provisions of all states and the second agent and agree to act in this capacity. I found 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 the obligations of my position as A in the proper and complete performance of my duties and I am form?
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(Registered agent's signature)
11. Attached is a certificate of activities
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.
of James James and Line 12 of

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

	CTORS (Street address only - P.O. Box NOT acceptable) PRAMOD JAIN		
Address:	8578 ETHANS GLEN_ TERRACE		
	JACKSON VEILLE, FL 32256-9069		
Vice Chai	irman:		
-			
Director:	-		<u> </u>
Address:		····	
	<u> </u>		
Director:			
Address:	= = = = = = = = = = = = = = = = = = = =		
B. OFFI	CERS (Street address only - P.O. Box NOT acceptable)	9	=
President	PRAMOD JAIN		
	8578 ETHANS GLEN TERRACE		
	JACKSONVILLE, FL 32256-9069		
Vice Presid	dent:	4	- 12.5 - 17.0 - 10.0
_	-Er		
Secretary:	PRAMOD JAIN		
Address: _	8578 ETHANS GLEN TERRACE		
_	JACKSONVILLE, FL 32256-9069		
Treasurer:	PRAMOD JAIN		
Address: _	8578 ETHANS GLEN TERRACE		
_	JACKSONVILLE, FL 32256-9069		
NOTE: If	necessary you may attach an addendum to the application listing additional officers and/or directors.		
13	Warmed Lain		
14.	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) PRAMOD JAN, PRESIDENT		
	(Typed or printed name and capacity of person signing application)		

File Number _____ 5815-883-6



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, de



In Testimony Whereof, I, hereto set

	Illinois, this	 13TH	
day of	MOGOSI	 1999	

Desse White