

F9900000 6/08

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: PHONECHARGE INC  
(Name of corporation - must include suffix)

200003049942--8  
-11/19/99--01077--005  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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:

SCOTT FEIFER  
(Name of Person)  
PHONECHARGE INC  
(Firm/Company)  
58 SCHOOL ST  
(Address)  
GREEN COVE, NY 11542  
(City/State/Zip)

RECEIVED  
TALLAHASSEE, FLORIDA

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

SCOTT FEIFER at (516) 671-2121 x 16  
(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

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. PhoneCharge, 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. NASSAU CITY, New York 3. 11-324844  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 6-7-94 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. MAY 3, 1999  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 58 SCHOOL STREET  
GREEN COVE, NY 11542  
(Current mailing address)

8. To engage in any lawful activity for which corps. may be organized  
(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: EDWARD BOBLAY

Office Address: 835 CANARY WALK

GULF STREAM, Florida, 33483  
(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.*

Edward Boblay  
(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)

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**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: PETER A. Bobley

Address: 58 SCHOOL ST

GLEN COVE, N.Y. 11542

Vice President: VINCENT HARMANN & VICTORIA MEAKIN

Address: 58 SCHOOL ST

GLEN COVE, N.Y. 11542

Secretary: PETER M. Bobley

Address: 58 SCHOOL ST

GLEN COVE, N.Y. 11542

Treasurer: SANDE STEWART

Address: 58 SCHOOL ST

GLEN COVE, N.Y. 11542

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

13. Peter A. Bobley

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. PETER A. Bobley

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

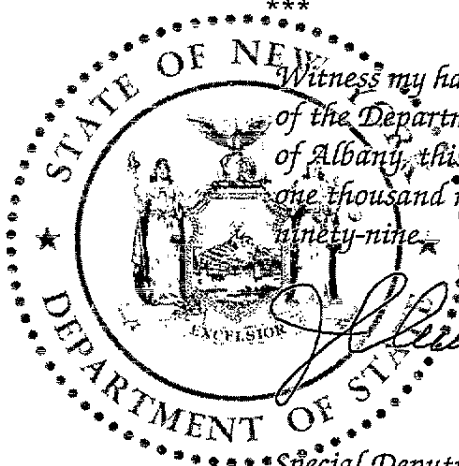
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State of New York } ss:  
Department of State

I hereby certify, that the certificate of incorporation of PHONECHARGE, INC. was filed on 06/07/1994, 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 06/19/1998.

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 03rd day of November  
one thousand nine hundred and  
ninety-nine.  
  
Special Deputy Secretary of State

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