## 

To: Qualification/Tax Lien Section Division of Corporations	<u> </u>
SUBJECT: PMM MARKETING, INC.	
(Name of corpora	tion - must include suffix)
Dear Sir or Madam:	-11/24/9901046006 *****70.00 ******70.00
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to transact business in Florida.	or Authorization to Transact Business in Florida", to register the above referenced foreign corporation
Please return all correspondence concerning this mat	tter to the following:
BRUCE GACHE'	_
	of Person)
PMM MARKETING, INC	•
(Firm/	Company)
1445 N.E. 56 CT.	
(A	ddress)
FORT LAUDERDALE, F	L 33334
(City/	State/Zip)
Should you need to call someone concerning this ma	
BRUCE GACHE at (954) (Name of Person) (Ar	ea Code & Daytime Telephone Number)
(Maric of Forson)	99 M SECRET
STREET ADDRESS:	MAILING ADDRESS:
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	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	Certified Copy  S87.50 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 GISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
KE	
1.	PMM MARKETING, 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	DELAWARE 3311-3023175  (State or country under the law of which it is incorporated) (FEI number, if applicable)
۷.	(State or country under the law of which it is incorporated) (FEI number, if applicable)
4	JUNE 19, 1990 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")
٦.	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
4	PENDING ACCEPTANCE OF THIS APPLICATION
٥.	(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7	1445 N.E. 56 CT.
,.	FORT LAUDERDALE, FL 33334
	(Current mailing address)
8.	ANY LAWFUL ACTIVITY PERMITTED UNDER DELAWARE AND FLORIDA LAWS  (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)
	NameRUCE GACHE'
C	NameRUCE GACHE'  Office Address: 1445 N.E. 56 CT
	FORT LAUDERDALE , Florida, 33334 (Zip code)
1	0. Registered agent's acceptance:
ti H	laying been named as registered agent and to accept service of process for the above stated corporation at the place designated in his 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)

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

<sup>11.</sup> 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.

A. DIREC	TORS (Street address only - P.O. Box NOT acceptable)
Chairman:	BRUCE GACHE'
Address: _	1445 N.E. 56 CT.,
_	FORT LAUDERDALE, FL 33334
Vice Chairr	man: BERNARD E. WILLIE
Address: _	1445 N.E. 56 CT.
	FORT LAUDERDALE, FL 33334
Director: _	BRUCE GACHE'
Address: _	1445 N.E. 56 CT.
_	FORT LAUDERDALE, FL 33334
Director: _	BERNARD E. WILLIE
Address: _	1445 N.E. 56 CT.
_	FORT LAUDERDALE, FL 33334
B. OFFIC	CERS (Street address only - P.O. Box NOT acceptable)
President:	BRUCE GACHE'
Address: _	1445 N.E. 56 CT.
_	FORT LAUDERDALE, FL 33334
Vice Presid	lent: BERNARD E. WILLIE
Address: _	1445 N.E. 56 CT.
_	FORT LAUDERDALE, FL 33334
Secretary:	BRUCE GACHE'
Address: _	1445 N.E. 56 CT.
_	FORT LAUDERDALE, FL 33334
Treasurer:	BERNARD E. WILLIE
Address: _	1445 N.E. 756 CT.
_	FORT LAUDERDALE, FL 33334
NOTE: I	f necessary, you may attach an addendum to the application listing additional officers and/or directors.
13	Brune Bocks
<u></u>	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14	BRUCE GACHE', PRESIDENT
	(Typed or printed name and capacity of person signing application)

## State of Delaware

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## Office of the Secretary of State

I, EDWARD J. FREEL. SECRETARY OF STATE OF THE STATE OF DELAWARE. DO HEREBY CERTIFY \*PMM MARKETING. 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 FIRST-DAY OF NOVEMBER.

AND ALDO HEREBY FURTHER CERTIFY THAT THE PRANCAISE TAXES

HAVE BEEN FAID TO HEREAT FURTHER CERTIFY THAT THE PRANCAISE TAXES

SECRETARY OF THE PRANCAISE TAXES

ALLAHASSEE TO INDEPEND TO I



Edward J. Freel, Secretary of State

**AUTHENTICATION:** 

DATF.

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