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### CORPORATION(S) NAME

| The Trade H                                  | OU       | use Interna                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | tion | <u></u> | il, Inc.                                  |
|----------------------------------------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|---------|-------------------------------------------|
|                                              |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      | _       |                                           |
| Profit ( ) NonProfit                         | (        | ) Amendment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | (    | )       | Merger                                    |
| ( ) Foreign                                  | (        | ) Dissolution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | (    | )       | Mark                                      |
| ( ) Limited Partnership<br>( ) Reinstatement | (        | } Annual Report<br>) Reservation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | (    | •       | Other<br>Change of Registered Agent       |
| Certified Copy                               | (        | ) Photo Copies                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | (    | _       | Certificate Under Seal                    |
| ( ) Call When Ready ( ) Will Wa              | (<br>ilt | ) Call If Problem                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | (    |         | After 4:30 25 CO                          |
| Name<br>Availability<br>Document             | ]        | المعارض المعار | A 45 | 1. 5    |                                           |
| Examinor  Updator                            |          | CERTIFIED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |      | 1       | CEIVED<br>323 III 8: 19<br>05 corporation |
| Verifier                                     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |         | 2                                         |
| Acknowledgment                               |          | F. CHESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | er F | ΞB      | 2 3 1996                                  |

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W.P. Varifier

MAPIRE Toll Free: 1-800-432-3028

LAW DEFICE

#### LAZARUS ROTHSTEIN, EA. 11077 BIBGAYNE BOULEVARD, PENTHOUSE MIAMI, PLORIDA BRIOT

LAZAROS ROTHSTEIN

JOHN M. ARESTY

February 20, 1996

TELEPHONE: (308) 899-2080 PACBIMILE: (308) 899-9889

Secretary of State Bureau of Corporate Records P.O. Box 6327 Tallahussee, Florida 32314

Re: Trade House International, Inc.

Dear Sir:

Enclosed herewith, please find an original and two copies of the proposed Articles of Incorporation of the above captioned corporation.

Please file the original and return a certified copy to this office.

Enclosed is a check in the sum of \$122.50 for the following:

Filing Fee: \$35.00 Certified Copy: 52.50 Registered Agent Fee: 35.00

TOTAL: <u>\$122.50</u>

Thank you for your cooperation.

Lazarus Rothstein

Very truly yours,

LR:cg Enclosures

#### ARTICLES OF INCORPORATION

OF

## THE TRADE HOUSE INTERNATIONAL, INC.

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, adopts the following Articles of Incorporation:

# ARTICLE I NAME AND PRINCIPLE OFFICE

The name of the Corporation is THE TRADE HOUSE INTERNATIONAL, INC. The initial principal office is 111 N.W. 183rd Street, Ste. 304, Miami, Florida 33169.

# ARTICLE II DURATION

The duration of the Corporation is perpetual.

## ARTICLE III PURPOSE

The Corporation is organized for the purpose of transacting any or all lawful business permitted under the laws of the State of Florida.

#### ARTICLE IV AUTHORIZED SHARES

The aggregate number of shares which the Corporation is authorized to issue is 1,000. Such shares shall be of a single class, and shall have a par value of One Dollar (\$1.00) per share.

# ARTICLE V REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Corporation and the name of the initial registered agent is:

Lazarus Rothstein, Esq. 11077 Biscayne Blvd., PH Miami, FL 33161

#### ARTICLE VI DIRECTORS

The number of directors constituting the board of directors of the Corporation shall be determined in accordance with the by-laws, but shall not be less than three (3). The number of directors constituting the initial board of directors to serve as members of the initial board of directors are:

Mohammad Javaid Iqbal Awan Gerald C. Delmonico Ehtesham UL HAQ Siddiqui

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Gerald C. Delmonico 111 N.W. 183rd Street, Ste. 304 Miami, FL 33169

ARTICLE VIII
INDEMNIFICATION

The Corporation shall indemnify each director, officer and shareholder of the Corporation against any and all liability and expense incurred by him in connection with or arising our of any action, suit or proceeding in which he may be involved, by reason of his being or having been an officer, director or shareholder of the Corporation to the full extend permitted by the laws of the State of Florida.

Executed by the undersigned on the <u>20</u> day of February 1996.

GERALD C. DELMONICO, INCORPORATOR

## STATE OF FLORIDA

## COUNTY OF DADE

| THE FOREGOING INSTRU<br>of February, 1996, by GERALD C. D<br>who produced<br>not) take an oath.      | MENT was acknowledged before me this day<br>ELMONICO, who are personally known to me OR<br>as identification and who did (did |
|------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| LAZARUS POTHSTEIN MY COMMISSION # CC 252728 E29 Mech 24, 1987 Bonded Thru Notery Public Underventure | Sign NOTARY PUBLIC                                                                                                            |

Print LAZARUS RUTHSTEIN

My Commission expire:

## ACKNOWLEDGMENT OF APPOINTMENT OF REGISTERED AGENT

Having been named the registered agent for the above Corporation at the place designated in the foregoing Articles of Incorporation, I hereby accept the same and agree to act in this capacity, and agree to comply with the provisions of Florida law relative to keeping the registered office open.

LAZARUS ROTHSTEIN, REGISTERED AGENT

SFEB 23 AN 8: 05

June 3, 1997

THE TRADE HOUSE INTERNATIONAL, INC. 111 NW 183 ST STE 304 MIAMI, FL 33169

SUBJECT: THE TRADE HOUSE INTERNATIONAL, INC.

Ref. Number: P96000016756

Debit Memo #: 8597-N

This is to inform you that check #886 in the amount of \$165.00 submitted with the annual report for THE TRADE HOUSE INTERNATIONAL, INC. has been returned by your bank because of NON-SUFFICIENT FUNDS.

We request you remit a cashier's check or money order, referencing the above named debit memo number, in the amount of \$180.00 made payable to the Department of State to cover the unpaid fees and service charge.

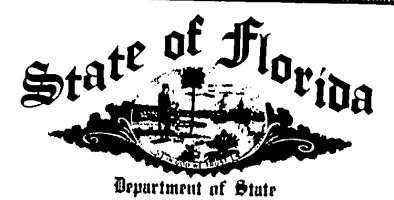
Section 607.1421 or 617.1421, Florida Statutes, requires at least 60 day notice of our intent to administratively dissolve or revoke your corporation for failure to file the annual report and pay the filing fee. Consider this your 60 day notice if the payment is not received, your corporation will be administratively dissolved or revoked on or after August 3, 1997 and a reinstatement fee of an additional \$585 will be imposed to reactivate the corporation.

Please send the replacement check to my attention at the address listed below.

If you have any questions concerning the filing of your document, please call (904) 487-6057.

Pat Bailey Accountant I

Letter Number: 697A00029860



## CERTIFICATE OF ADMINISTRATIVE DISSOLUTION

The provisions of section 607.1421 or 617.1421, Florida Statutes, which requires 60 days notice of a proposed dissolution, have been met for THE TRADE HOUSE INTERNATIONAL, INC., a corporation organized under the laws of the State of Florida. This corporation is hereby administratively dissolved as of August 18, 1997 for failure to file the required annual report(s), as required by law.

The document number of this corporation is P96000016756.

# 9600016756

Giben under my land and the Great Seal of the State of Harida, at Talkhassee, the Capital, this the Nineteenth day of August, 1997



CR2EO22 (2-95)

Sendre B. Mortlan

Sandra B. Mortham Secretary of State