

F010000004222

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DATA TRANSFORMATION CORP.
(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:

JUNE TANGHOW

(Name of Person)

DATA TRANSFORMATION CORP.

(Firm/Company)

ONE PENN PLAZA, SUITE 4515

(Address)

NEW YORK, NEW YORK 10119

(City/State and Zip code)

500004478515--7
-07/16/01--01135--013
*****70.00 *****70.00

For further information concerning this matter, please call:

JUNE TANGHOW

(Name of Person)

at (212) 563 - 7565

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STATE OF FLORIDA
TALLAHASSEE, FLORIDA
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Wly/g

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

EP



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

July 18, 2001

JUNE TANGHOW
DATA TRANSFORMATION CORP.
ONE PENN PLAZA, SUITE 4515
NEW YORK, NY 10119

SUBJECT: DATA TRANSFORMATION CORP.
Ref. Number: W01000016528

We have received your document for DATA TRANSFORMATION CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

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) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 701A00042079



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SECRETARY OF STATE
TALLAHASSEE FLORIDA

*See Info attached.
Thank you
Mrs. June Tanghow*

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. DATA TRANSFORMATION CORP.
2. NEW YORK
3. 13 - 2636886
4. 4/28/68
5. PERPETUAL
6. UPON QUALIFICATION
7. ONE PENN PLAZA, SUITE 4515 NEW YORK, NEW YORK 10119

- 8. EXTENDED BUSINESS OPPORTUNITY TO WORK WITH THE FEDERAL GOVERNMENT
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: William Young
Office Address: 5050 Timber Lane
Cocoa, Florida 32926

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...

William Young (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.

FILED 01 AUG -9 AM 10:05 SECRETARY OF STATE TALLAHASSEE FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: ANDREW THRASH

Address: 345 W 145th Street, New York, NY 10031

Vice President: N/A

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

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

14. ANDREW THRASH - PRESIDENT
(Typed or printed name and capacity of person signing application)

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STATE
SECRETARY OF
TALLAHASSEE, FLORIDA

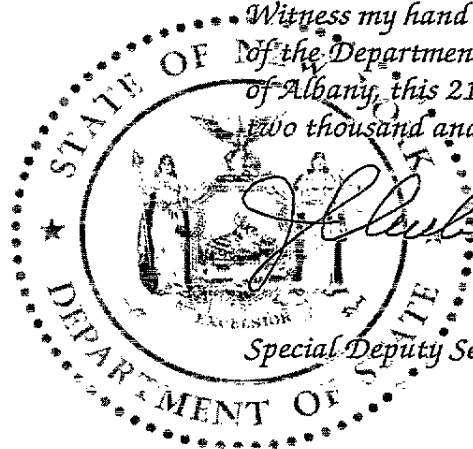
State of New York } ss:
Department of State

I hereby certify, that the Certificate of Incorporation of DATA TRANSFORMATION CORP. was filed on 04/23/1968, under the name of DATA TRANSFORMATION INC., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with 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.

A Certificate of Amendment DATA TRANSFORMATION INC., changing its name to DATA TRANSFORMATION CORP., was filed 03/12/1969.

The Biennial Statement is past due.

Witness my hand and the official seal
of the Department of State at the City
of Albany, this 21st day of June
two thousand and one.



[Signature]
Special Deputy Secretary of State

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FILED
SECRETARY OF STATE
TALLAHASSEE FLORIDA