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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: HYD CORPORATION	
	corporation - must include suffix)
Dear Sir or Madam:	
,, , , , , , , , , , , , , , , , , , , ,	uthorization to Transact Business in Florida", "Certificate of referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter t	o the following:
THOMAS M. GRBELJA, CPA	
	me of Person)
BURKE, GRBELJA & SYMEONIDES, LLC	
	m/Company)
27 MADISON AVENUE	
	(Address)
PARAMUS, NEW JERSEY 07652	
	ate and Zip code)
For further information concerning this matter, please ca	Π:
THOMAS M. GRBELJA atat	(201) 845-7001
(Name of Person) (Area Co	de & Daytime Telephone Number)
STREET ADDRESS:	MATCING ADDRESS:
Registration Section	Registration Section
Division of Corporations 409 E. Gaines St.	Division of Corporations P.O. Box 6327
Tallahassee, FL 32399	Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certified Copy 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.	HYD CORPORATION									
	(Name of corporation; must include the word "INCOR"	PORATE	D", "COMPANY", "COI	RPORATION"	or					
	words or abbreviations of like import in language as w	ill clearly	indicate that it is a corp	oration instead	of a					
	natural person or partnership if not so contained in the	name at	present.)							
2.	NEW JERSEY	3.	47-0932001							
	(State or country under the law of which it is incorpora	ited)		number, if app	licable)					
		,	(=-		,					
4.	9-30-2003	5	perpetual							
•	(Date of incorporation)		(Duration: Year cor	n will cease to	exist or	"nern(etual")			
	(Date of moorphilation)		(Buration: Tear con	p. Will cease it	CAIST OF	perpe	···uai)			
6.	UPON QUALIFICATION									
٠.	(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")									
			07.1502 and 817.155, F.S		սրտո գու	illicati	1011.			
	(202 220110110 00)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,						
7.	1111 Van Houten Avenue , Clifto	n. N.I	07013							
′•			e address)							
	(11111	cipai omi	e adaress)							
	(Curre	ent mailir	g address)							
	(*****	5 44 4 1 5 3 2 7							
8.	Development of residential prop	artv	for sale in Fl	orida						
Ο.	(Purpose(s) of corporation authorized in he				Florida)					
	(1 dipose(s) of corporation additionable in the	ome state	or country to be carried	out in state of						
9.	Name and street address of Florida registered ag	onts (D)	Day or Mail Dron D	ov NOT ogge	rtaĥla)	40				
7.	Name and <u>street address</u> of Florida registered ag	gent. (1.	J. BOX OF WEAR DEOP D	ox <u>not</u> acce	ptaole)	04 JAN				
	No. 20 and 1					-	5			
	Name: <u>Arthur Skolnick</u>				•	22	80- 34grq Luff .			
					. ~		7			
Off	fice Address: 755 WHITMORE DRIVE					75	J.			
							** string **			
	PORT ST. LUCIE	·	Florida	34984		(4)				
	(City)			(Zip code)	المت	വ				

10. Registered agent's acceptance:

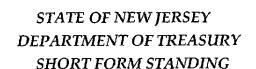
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

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 business addresses of officers and/or directors: A. DIRECTORS Chairman: David Mocera Address: 1111 Van Houten Avenue Clifton, NJ 07013 Vice Chairman: Address: Director: Address: Director: Address: B. OFFICERS President: David Mocera Address: 1111 Van Houten Avenue Clifton, NJ 07013 Vice President: Jeffrey Canfora Address: 89 Lincoln Street, East Hanover, NJ Secretary: Arthur Skolnick Address: 755 Whitmore Drive, Port St. Lucie, FL 34984 Treasurer: Jay J. Leone Address: 594 Hartford Drive, Nutley, NJ 07110 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman: Vice Chairman, or any officer listed in number 12 of the application) 14. David Mocera, President

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



HYD CORPORATION

0100912513

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on September 30, 2003.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Thomas M. Grbelja, Cpa 27 Madison Avenue Paramus, NJ 07652

Continued on next page . . .

