

Division of Corporations

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Florida Department of State  
Division of Corporations  
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DIVISION OF CORPORATION

FOREIGN PROFIT QUALIFICATION

East Shore Partners, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Electronic Filing Menu

Corporate Filing

Public Access Info

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 East Shore Partners, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2 Delaware 3 113064955 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4 February 8, 1991 5 perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607 1501 & 607 1502, F.S., to determine penalty liability)

7 150 Motor Parkway, Suite 202, Hauppauge, NY 11788 (Principal office address)

150 Motor Parkway, Suite 202, Hauppauge, NY 11788 (Current mailing address)

8 to engage in any lawful act or activity for which corporations may be incorporated under the laws of the State of Florida (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 NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324 (City) (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.

CT Corporation System

By: [Signature] (Registered agent's signature)

Michael J. Mitchell Assistant Secretary

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:

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**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Carl De Lioia

Address: 150 Motor Parkway, Suite 202, Hauppauge, NY 11788

Exec. Vice President: Anton J. Gerdes

Address: 150 Motor Parkway, Suite 202, Hauppauge, NY 11788

Exec. Vice President: \_\_\_\_\_

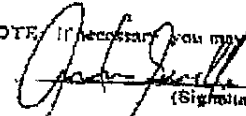
~~SECRETARY:~~ Harold J. Garrecht

Address: 150 Motor Parkway, Suite 202, Hauppauge, NY 11788

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

13  \_\_\_\_\_  
(Signature of Director or Officer listed in number 12 of the application)

14. Anton J. Gerdes, Executive Vice President  
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

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# Delaware

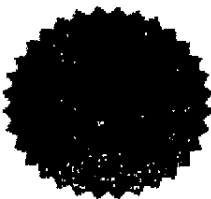
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## *The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EAST SHORE PARTNERS, 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 TWENTY-FOURTH DAY OF JANUARY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

2254434 8300

AUTHENTICATION: 3636959

050058121

DATE: 01-24-05