CT COR FRATEO ENO OOOO 188

CORPORATION(S) NAME						
CANTAGON (CO) Intern 100	p. (3) Enteron Pharmaceuticals Inc.	Self-				
		70, 00				
		97 00				
		<u> </u>				
 -		·				
		 -				
		4000037919541 -03/02/0101001015				
~		******78.75 ******78.75				
Profit	() Amendment	() Merger				
() Nonprofit	() Dissolution/Withdrawal	() Mark				
Foreign	() Reinstatement	()				
() Limited Partnership	() Annual Report	() Other				
() LLC	() Name Registration	() Change of RA				
()LLC	() Fictitious Name	() UCC				
Certified Copy	() Photocopies	() CUS				
Yearined Copy	()Indiasopius	· ·				
() Call When Ready	() Call If Problem	() After 4:30				
(x) Walk In	() Will Wait	(x) Pick Up				
() Mail Out	() 1, 22.					
() Mail Out						
Name	3/1/01	Order#: 3720232				
Availability		SU 28				
Document	Λ _Λ ζ					
Examiner	M.S.	Ref#: Ref#:				
Updater		55 T 926				
Verifier	- • •					
W.P. Verifier	•	Amount: \$ 700 2 37				
		LING STATION				
	n.	AATE TION				

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

2/1/0/

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IF COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED FOR REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDAY.

1. E	Enteror	Pharmaceuticals. Inc.		307
(Name of abbreviati	f corpo ion of lik	ration: must include the word "INCORPO	DRATE hat it is	ED", "COMPANY", "CORPORATION' of words of a corporation instead of a natural person or partnership if
2. D	Delawa	re	3.	13-403-8081
(State or c	country (under the law of which it is incorporated)	(FE	I number, if applicable)
4. Ju	lu 23	, 1948	5.	Perpetual
(Date of in	ncorpora	ntion)	(Du	ration: Year corp. will cease to exist or "perpetual")
6. F	ebrua	ry 26, 2001		
· · ·	(Date	first transacted business in Florida.) (SEE SE	CTIO1	NS 607.1501, 607.1502 AND 817.155, F.S.)
		ichigan Avenue, Suite 700 Florida 33139		
		(Current mail	ling add	Iress)
	_	ge in any lawful act or activity for whication Law of Delaware.	h corp	porations may be organized under the General
	(Pu	rpose(s) of corporation authorized in home sta	ite or co	ountry to be carried out in state of Florida)
9. Name an	ıd stree	t address of Florida registered agent: (P.O. B	Box or Mail Drop Box NOT acceptable)
N	Vame:	CT Corporation System		
Office Ad	dress:	1200 South Pine Island Road		
		Plantation	, F	lorida, <u>33324</u>
				(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 and accept the obligations of my position as registered agent.

CT Corporation System

Connie Bryan

SPECIAL ASSISTANT SECRETARY

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

١.	DIRECTORS (Street address only	7 - P	.0.	. Box	NOT	acceptable))
----	-------------	---------------------	-------	-----	-------	-----	-------------	---

Director:

Michael Ferrari

Address:

c/o Corporate Technology Development 1680 Michigan Avenue, Suite 700

Miami, Florida 33139

Director:

Steve H. Kanzer

Address:

c/o Corporate Technology Development

1680 Michigan Avenue, Suite 700

Miami, Florida 33139

Director:

Nicholas Stergiopoulos

Address:

c/o Corporate Technology Development

1680 Michigan Avenue, Suite 700

Miami, Florida 33139

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President:

Nicholas Stergiopoulos

Address:

c/o Corporate Technology Development

1680 Michigan Avenue, Suite 700

Miami, Florida 33139

Secretary:

Steve H. Kanzer

Address:

c/o Corporate Technology Development

1680 Michigan Avenue, Suite 700

Miami, Florida 33139

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

13.

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

14. Nicholas Stergiopoulos, Treasurer

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

State of Delaware

PAGE 1

Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ENTERON PHARMACEUTICALS, 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-EIGHTH DAY OF FEBRUARY, A.D. 2001.

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

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



Darriet Smith Windson, Secretary of State

2924680 8300

AUTHENTICATION: 0996286

010100952

DATE: 02-28-01