



# F02000000427

ACCOUNT NO. : 072100000032

REFERENCE : 090024 7272025

AUTHORIZATION :

COST LIMIT : \$ PPD

FILED  
02 JAN 25 PM 3:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : January 25, 2002

ORDER TIME : 10:41 AM

ORDER NO. : 090024-005

CUSTOMER NO: 7272025

CUSTOMER: Mary-kate .. Haney, Legal Asst  
Squire, Sanders & Dempsey Llp  
201 North Franklin Street  
Suite 2100  
Tampa, FL 33602

RECEIVED  
02 JAN 28 PM 12:12  
DEPARTMENT OF STATE  
DIVISION OF REGISTRATION  
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: OLYMPUS LATIN AMERICA, INC.

200004798492-5  
-01/25/02--01072--012  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- XX PLAIN STAMPED COPY
- XX CERTIFICATE OF GOOD STANDING

AK

CONTACT PERSON: Norma Hull -- EXT# 1115

EXAMINER: \_\_\_\_\_

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
JAN 25 PM 3:11 '98  
FILED

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. Olympus Latin America, Inc.

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Delaware

(State or country under the law of which it is incorporated)

3. \_\_\_\_\_

(FEI number, if applicable)

4. November 13, 2001

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon qualification

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 6100 Blue Lagoon Drive, Suite 390, Miami, Florida 33126-2087

(Principal office address)

same as above

(Current mailing address)

8. Sales, marketing and repair of medical diagnostic equipment for Latin American market

(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 or Mail Drop Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

, Florida 32301

(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.*

**Brian Courtney**  
**Asst. V. Pres.**

(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

Director ~~XXXXXXXXXX~~ Nobukazu Kuroiwa  
Address: 6100 Blue Lagoon Drive, Suite 390  
Miami, FL 33126-2087

Director ~~XXXXXXXXXX~~ Mark Gumz  
Address: 2 Corporate Center Drive  
Melville, NY 11747-3157

Director: Hiroyuki Furihata  
Address: 2951 Ishikawa-cho  
Hachioji-shi, Tokyo 192-8057, Japan

Director:  
Address:

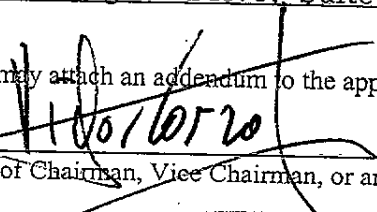
B. OFFICERS

President: Nobukazu Kuroiwa  
Address: 6100 Blue Lagoon Drive, Suite 390  
Miami, FL 33126-2087

Vice President: N/A  
Address:

Secretary: Victor Ramon Corzo  
Address: 6100 Blue Lagoon Drive, Suite 390, Miami, FL 33126-2087  
Treasurer: Victor Ramon Corzo  
Address: 6100 Blue Lagoon Drive, Suite 390, Miami, FL 33126-2087

NOTE: If necessary, you may attach 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. Victor Ramon Corzo, Secretary/Treasurer  
(Typed or printed name and capacity of person signing application)

FILED  
JUN 25 PM 3:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

State of Delaware  
Office of the Secretary of State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OLYMPUS LATIN AMERICA, 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 THIRTEENTH DAY OF DECEMBER, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED  
02 JAN 25 PM 3:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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

3444309 8300

AUTHENTICATION: 1501331

010639211

DATE: 12-13-01