



F02000005147

ACCOUNT NO. : 072100000032

REFERENCE : 777667 4804310

AUTHORIZATION :

*Patricia Pujols*

COST LIMIT : \$ 70.00

ORDER DATE : October 10, 2002

ORDER TIME : 10:14 AM

ORDER NO. : 777667-005

CUSTOMER NO: 4804310

CUSTOMER: George Vanarthos, Paralegal  
Alston & Bird Llp  
90 Park Avenue  
15th Floor  
New York, NY 10016-1387

RECEIVED  
02 OCT 11 AM 11:40  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: SENSORIX INC.

400008334484--2

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Ginger Simmons -- EXT# 1139

EXAMINER:

*JP*  
*10-11-02*

02 OCT 11 PM 1:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

**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. Sensorix 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. New Jersey 3. 01-0705616  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. May 14, 2002 5. Perpetual  
(Date of incorporation) (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. 2125 Center Avenue, Suite 500, Fort Lee, New Jersey 07024  
(Principal office address)
- 2125 Center Avenue, Suite 500, Fort Lee, New Jersey 07024  
(Current mailing address)

8. To engage in any lawful act or activity pursuant to New Jersey and Florida Law.  
(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, Florida 32301  
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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**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.*

Corporation Service Company

*Aracelis Byron*  
(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: \_\_\_\_\_

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

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

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

Director: Dr. Friedrich Tschopp

Address: Sensorix AG

Technoparkstrasse 1, 8005 Zurich, Switzerland

Director: Markus Rothmaier

Address: Sensorix AG

Technoparkstrasse 1, 8005 Zurich, Switzerland

B. OFFICERS

President: Dr. Friedrich Tschopp

Address: Sensorix AG

Technoparkstrasse 1, 8005 Zurich, Switzerland

Vice President: Reto R. Hartman

Address: Sensorix AG

Technoparkstrasse 1, 8005 Zurich, SWITZERLAND

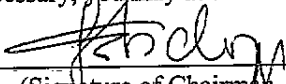
Secretary: Richard Danoff

Address: Sensorix Inc., 2125 Center Avenue, Suite 500, Fort Lee New Jersey 07024

Treasurer: None

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

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. Dr. Friedrich Tschopp, President  
(Typed or printed name and capacity of person signing application)

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AND  
FILED  
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SECRETARY OF STATE  
TALAHASSEE FLORIDA

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

SENSORIX INC.

*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 May 14, 2002.*

*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:*

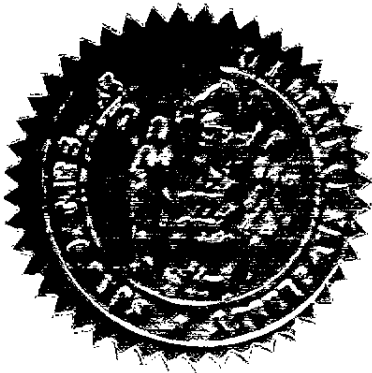
*Tschudin Inc  
2125 Center Ave  
Suite 500  
Fort Lee, NJ 07024*

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STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

SENSORIX INC.

IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
10th day of October, 2002



A handwritten signature in cursive script, which reads 'John E. McCormac'.

John E McCormac, CPA  
State Treasurer