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Division of Corporations

CT CORPORATION

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FO40000002282

Florida Department of State
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FOREIGN PROFIT QUALIFICATION

Williams Medical Group, P.C.

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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. WILLIAMS MEDICAL GROUP, P.C.

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

TEST-MED VACCINATION SERVICES

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

2. OKLAHOMA

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

3.

68-0551097

(FEI number, if applicable)

4. 4-16-2003

(Date of incorporation)

5.

PERPETUAL

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

6. UPON QUALIFICATION

(Data 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. 870 MARKET STREET, SUITE 1119, SAN FRANCISCO, CA 94102

(Principal office address)

870 MARKET STREET, SUITE 1119, SAN FRANCISCO, CA 94102

(Current mailing address)

8. OFFER CORPORATE VACCINATION SERVICES

(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: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida 33324

(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: Tina Perrin

(Registered agent's signature)

Tina Perrin
Special 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:

A. DIRECTORSChairman: REGINA L. WILLIAMS, M.D.Address: 2001 S. GARNETT RD., SUITE F, TULSA, OK 74128

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERSPresident: REGINA L. WILLIAMS, M.D.Address: 2001 S. GARNETT RD., SUITE F, TULSA, OK 74128Vice President: REGINA L. WILLIAMS, M.D.Address: 2001 GARNETT RD., SUITE F, TULSA, OK 74128Secretary: JEFF WILMOTHAddress: 77 TERRA VISTA AVE., SAN FRANCISCO, CA 94115Treasurer: JEFF WILMOTHAddress: 77 TERRA VISTA AVE. SAN FRANCISCO, CA 94115

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. _____

JEFF WILMOTH - SECRETARY / TREASURER

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



CERTIFICATE OF GOOD STANDING
DOMESTIC FOR PROFIT CORPORATION PROFESSIONAL

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that WILLIAMS MEDICAL GROUP, P.C. whose registered agent is DWIGHT L. SMITH, with its registered office at 406 S BOULDER STE. 634 TULSA 74103 USA Oklahoma is a Domestic For Profit Corporation Professional duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.

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IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 22nd, day of April, 2004.

M. Susan Sawyer

Secretary Of State