

SteriLux, Inc.
1708 North Federal Highway
Lake Worth, Florida 33460
Tel: (407) 585-0039 FAX: (407) 582-6213

June 26, 1995

A95000001096

Division of Corporations
Secretary of State
Post Office Box 6327
Tallahassee, Florida 32314

300001527783
-06/30/95--01008--005
****297.50 ****297.50

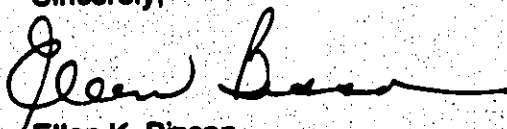
RE: New Limited Partnership

Enclosed are two originals of the documentation required to register a new Florida Limited Partnership, SteriLux, Ltd.

Also provided is our check for \$297.50 which includes \$210.00 to reflect \$30,000 in annual capital contributions, \$35.00 for designation of Albert J. Endruschat, DDS (1708 North Federal Highway, Lake Worth, FL 33460) as Registered Agent, and \$52.50 for the return to Dr. Endruschat of a Certified True Copy of this certificate.

Thank you for your help.

Sincerely,



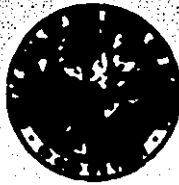
Ellen K. Bisson
Corporate Secretary
SteriLux, Inc., General Partner

FILED
JUL 18 AM 11:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name	
Availability	11/6/95 dcc
Document Examiner	cc: A.J. Endruschat, DDS Enclosures
Translator	no
Translator Verifier	IC
Acknowledgement	DCC
W. P. Verifier	DCC

A95000001096

W95000013619



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

July 6, 1995

ELLEN K. BISSON
STERILUX, INC.
1708 NORTH FEDERAL HIGHWAY
LAKE WORTH, FL 33460

SUBJECT: STERILUX, LTD.
Ref. Number: W95000013619

We have received your document for STERILUX, LTD. and your check(s) totaling \$297.50. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 620.108, Florida Statutes, an affidavit declaring the amount of the capital contributions of the limited partners and the amount anticipated to be contributed by the limited partners must accompany the certificate of limited partnership. The affidavit must be signed by all general partners and notarized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6913.

Diane Cushing
Corporate Specialist

Letter Number: 395A00032754

**CERTIFICATE OF LIMITED PARTNERSHIP
OF
STERILUX, LTD.**

The undersigned, acting as organizer of a Limited Partnership pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act hereby adopts the following certificate for such Limited Partnership:

1. The name of the Limited Partnership is:

STERILUX, LTD.

2. (a) The address of the office of the Partnership at which place the records shall be maintained is:

1708 North Federal Highway
Lake Worth, Florida 33460

- (b) The name and address of the Partnership's agent for service of process is:

Albert J. Endruschat, DDS
1708 North Federal Highway
Lake Worth, Florida 33460

3. The name and address of the General Partner is:

STERILUX, INC. P950000 51432
1708 North Federal Highway
Lake Worth, Florida 33460

4. The mailing address for the Limited Partnership is:

c/o Albert J. Endruschat, DDS
1708 North Federal Highway
Lake Worth, Florida 33460

5. The term of the Partnership shall commence on the date of filing of this Certificate with the Secretary of State of Florida and shall continue until December 31, 2044, unless sooner terminated as provided in the Articles of Limited Partnership Agreement.

FILED
1995 JUL 18 AM 11:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

IN WITNESS WHEREOF, the undersigned General Partner has
hereto executed this Certificate as of the 23rd day of June
19 95.

GENERAL PARTNER:

STERILUX, INC.
a Florida corporation

(CORPORATE SEAL)

Attest: [Signature]

Secretary

By: [Signature]

A.J. Endruschat, President

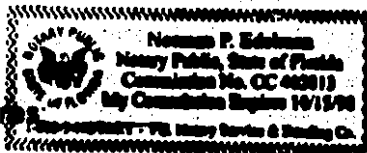
STATE OF FLORIDA)
COUNTY OF WEST PALM BEACH)

The foregoing instrument was acknowledged before me this
23rd day of June, 1995, by A.J. Endruschat, as President
of SteriLux, Inc., on behalf of the corporation, and who is personally known
to me or has produced Florida drivers license
as identification.

Print Name: NORMAN P. EDELMAN

NOTARY PUBLIC
State of Florida

My Commission Expires



Having been named to accept service of process for the above stated
Limited Partnership, at the place designated in this Certificate of Limited
Partnership, I hereby act in this capacity, and I further agree to comply with
the provisions of all statutes relative to the proper and complete performance
of my duties.

[Signature]
ALBERT J. ENDRUSCHAT
Registered Agent
Dated: 6-23-95

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned constituting all of the general partners of

STERILUX, LTD., a Florida Limited Partnership, certify as follows:

The amount of capital contributions to date of the limited partners is \$ 19,000⁰⁰.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$ 30,000⁰⁰.

This 13th day of July, 19 95.

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury I (we) declare that I (we) have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief.

Sterilux Inc.
General Partner

by A.J. Enderschat
~~General Partner~~ *pres*

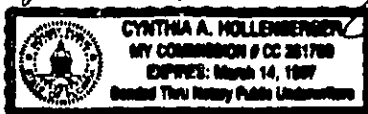
A.J. Enderschat, President
~~General Partner~~

~~General Partner~~

~~General Partner~~

~~General Partner~~

Cynthia A. Hollenberger



FILED
955 JUL 18 PM 11:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra Morthav
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 FEB 15 AM 9:57

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

1a. DOCUMENT #
A95000001086

STERILUX, LTD.

Mailing Address

1700 NORTH FEDERAL HIGHWAY
LAKE WORTH FL 33400

Principal Office Address

1700 NORTH FEDERAL HIGHWAY
LAKE WORTH FL 33400

2. New Mailing Address, if Applicable

Suite, Apt. #, etc.

City, State & Zip

2a. New Principal Office, if Applicable

Suite, Apt. #, etc.

City, State & Zip

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a

3. Date Formed or Registered to Do Business in
FLORIDA

07/10/1995

3a. Date of Last Report

4. State or Country of Formation

FL

5a. Capital Contributions as Shown
on Record

\$30,000.00

5b. Amount of Capital Contributions in
FLORIDA to date:

6. FEI Number

65-0599127

Applied For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

8. FEES: 1) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50
2) Supplemental Fee: \$138.75 (pursuant to section 607.193, F.S.)

THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)

Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

ENDRUSCHAT, ALBERT J DDS
1700 NORTH FEDERAL HIGHWAY
LAKE WORTH FL 33400

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)

STERILUX, INC.

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

1700 NORTH FEDERAL HI

11b. City, State & Zip Code

LAKE WORTH FL 33400

11c. Registration/
Document Number

P0000001432

AR - \$210.00
SF - \$138.75

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes

SIGNATURE

Typed or Printed Name of General Partner Signing Form

Ellen K. Bosson

Telephone Number

(703)527-0166

CR2E003 (6/95)

1/27/97

CORPORATE DETAIL RECORD SCREEN

9:10 AM

NUM: A95000001096 ST:FL ACTIVE/FL LP FLD: 07/18/1995

ACT CONT: 30,000.00 FEI#: 65-0599127

NAME : STERILUX, LTD.

PRINCIPAL: 1708 NORTH FEDERAL HIGHWAY

ADDRESS LAKE WORTH, FL 33460

RA NAME : ENDRUSCHAT, ALBERT J DDS

RA ADDR : 1708 NORTH FEDERAL HIGHWAY

LAKE WORTH, FL 33460 US

ANN REP :

(1996) I 02/15/96

A 95000001096

700002073027--4

--01/29/97--01091--005

*****52.50 *****52.50

1. MENU, 3. PARTNERS

ENTER SELECTION AND CR:

FILED
97 JAN 24 PM 3:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name	
Availability	
Document Examiner	DCC
Updater	DOC
Updater Verifier	DCC
Indorsement	DCC
Signer	DLC

increasing
\$34,000.00

C. TAX _____
FILING FEE 52.50
R. COURT FEE _____
C. CLERK _____
TOL _____
N. BANK _____
BALANCE DUE _____
REFUND _____



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

**SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A
FLORIDA LIMITED PARTNERSHIP**

The undersigned general partners of Sterilux, Ltd

Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112,
Florida Statutes.

The total amount of the capital contributions of the limited partners is: \$ 34,000

This 21st day of January, 19 97

FURTHER AFFIANT SAYETH NOT.

*Under penalties of perjury I declare that I have read the foregoing and that the facts are true, to
the best of my knowledge and belief.*

General Partner(s)

Sterilux, Inc

By Jeanette K. [Signature]
Corp Secy

FEES:

\$7 per \$1,000 based on the additional contributions
(Minimum \$52.50 - Maximum \$1,750.00)

DNHSE20/A/95)