

# F060000000939

## TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: Patient Data Corporation  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following: 700003139057--1

Len Bronoff, Esq.  
(Name of Person)  
Atty for Patient Data Corp.  
(Firm/Company)  
1947 Lee Road  
(Address)  
Winter Park, FL 32789  
(City/State/Zip)

-02/18/00--01005--003  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

Should you need to call someone concerning this matter, please call:

Len BRONOFF at (407) 628-5200  
(Name of Person) (Area Code & Daytime Telephone Number)

FILED  
00 FEB 17 AM 8:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### STREET ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

### MAILING ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

mtm  
2/22

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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. Patient Data Corporation  
(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 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. February 9, 2000 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. March 1, 2000  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 603 MONROE Avenue  
Cape Canaveral, FL 32920  
(Current mailing address)

8. to do any and all things legal within the State of Florida.  
(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: Len ARONOFF, Esq.

Office Address: 1947 Lee Road  
Winter Park, FL 32789  
(Zip code)

FILED  
00 FEB 17 AM 8:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

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

**A. DIRECTORS (Street address only - P.O. Box NOT acceptable)**

Chairman: Richard Schuman

Address: 603 Monroe Avenue  
Cape Canaveral, Fla. 32920

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

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

Director: David Ross

Address: 605 Monroe Avenue  
Cape Canaveral, Fla. 32920

Director: David Klein, M.D.

Address: 1011 Tufley Cove  
Heathrow, FL 32746

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

President: Richard Schuman

Address: 603 Monroe Avenue  
Cape Canaveral, FL 32920

Vice President: \_\_\_\_\_

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

Secretary: Richard Schuman

Address: 603 Monroe Avenue  
Cape Canaveral, FL 32920

Treasurer: Richard Schuman

Address: 603 Monroe Avenue  
Cape Canaveral, FL 32920 -

FILED  
00 FEB 7 AM 8 51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

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

14. Richard Schuman  
(Typed or printed name and capacity of person signing application)

*State of Delaware*  
*Office of the Secretary of State*

---

PAGE 1

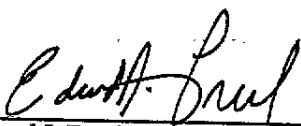
I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PATIENT DATA CORPORATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF FEBRUARY, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PATIENT DATA CORPORATION" WAS INCORPORATED ON THE NINTH DAY OF FEBRUARY, A.D. 2000.

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

FILED  
00 FEB 17 AM 8:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



  
Edward J. Freel, Secretary of State

3173675 8300

001071805

AUTHENTICATION: 0254642

DATE: 02-11-00