

# F000000003162

## TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: P.E.T. Net Pharmaceutical Services, Inc.  
(Name of corporation - must include suffix)

MJH

Dear Sir or Madam: 00789 - 00734 - 00547 - 00671

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:

500003190955-4

-03/30/00--01118--007  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

Tom Welch  
(Name of Person)

P.E.T. Net Pharmaceutical Services, Inc. W-8780  
(Firm/Company)

810 Innovation Drive  
(Address)

Knoxville, TN 37932  
(City/State/Zip)

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

Thomas Welch at (865) 218-2560  
(Name of Person) (Area Code & Daytime Telephone Number)

500003190955-4

-06/02/00--01056--009  
\*\*\*1150.00 \*\*\*1150.00

### 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

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

00 JUN - 1 AM 10:09  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

April 3, 2000

TOM WELCH  
810 INNOVATION DRIVE  
KNOXVILLE, TN 37932

SUBJECT: P.E.T. NET PHARMACEUTICAL SERVICES, INC.  
Ref. Number: W00000008780

We have received your document for P.E.T. NET PHARMACEUTICAL SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1150.00.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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 (850) 487-6967.

Michelle Hodges  
Document Specialist

Letter Number: 000A00018091

**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. P.E.T. Net Pharmaceutical Services, 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. Tennessee

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

3. 62-1801322

(FEI number, if applicable)

4. 9/30/99

(Date of incorporation)

5. PERPETUAL

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

6. APRIL '96 AS LLC; CONVERTED TO C-CORPORATION 9/3/99

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

7. 810 Innovation Drive

Knoxville, TN 37932

(Current mailing address)

8. Manufacturing / Distribution of Radiopharmaceuticals.

(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: The Prentice-Hall Corporation System, Inc.

Office Address: 1201 Hays Street

Tallahassee, FL

, Florida, 32301

(Zip code)

00 JUN - 1 AM 10:10  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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.

James L. Dunn

(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)**

*See attached*

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

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

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

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

Director: \_\_\_\_\_

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

Director: \_\_\_\_\_

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

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

*See attached*

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

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

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

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

Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

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. \_\_\_\_\_

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

**(Officers)**

	Name	Address	City/State/Zip
President:	Mark Rhoads	810 Innovation Drive	Knoxville, TN 37932
Vice President:	Hank Chilton	810 Innovation Drive	Knoxville, TN 37932
Vice President:	Brad Holmgren	3571 Peachtree Pkwy, Suite C	Suwanee, GA 30024
Vice President:	Jerry Kuhs	3571 Peachtree Pkwy, Suite C	Suwanee, GA 30024
Vice President:	Ruth Tesar	2609 Capitol Ave, Suite 7	Sacramento, CA 95816
Secretary:	Ron Nutt	810 Innovation Drive	Knoxville, TN 37932

**(Board of Directors)**

Name	Address	City/State/Zip
Terry Douglass	810 Innovation Drive	Knoxville, TN 37932
Ron Nutt	810 Innovation Drive	Knoxville, TN 37932
Neal Morrison	First Union, First Union Center	Charlotte, NC 28288-0732
David Gilliland	Geodex Technology, 309-G S. Westgate Drive	Greensboro, NC 27407
Gene McGrevin	3571 Peachtree Pkwy, Suite C	Suwanee, GA 300024
Mike Phelps	Univ. of CA-LA, 650 Charles Young Dr. Room 23-120-CHS, Box 951735	Los Angeles, CA 90095-1735

# Secretary of State

## Corporations Section

James K. Polk Building, Suite 1800  
Nashville, Tennessee 37243-0306

ISSUANCE DATE: 02/02/2000  
REQUEST NUMBER: 00033510  
TELEPHONE CONTACT: (615) 741-6488  
CHARTER/QUALIFICATION DATE: 09/09/1999  
STATUS: ACTIVE  
CORPORATE EXPIRATION DATE: PERPETUAL  
CONTROL NUMBER: 0376815  
JURISDICTION: TENNESSEE

TO:  
P.E.T.NET PHARMACEUTICAL SERVICES, INC  
%LIZ HOUSE  
810 INNOVATION DR.  
KNOXVILLE, TN 37932

REQUESTED BY:  
P.E.T.NET PHARMACEUTICAL SERVICES, INC  
%LIZ HOUSE  
810 INNOVATION DR.  
KNOXVILLE, TN 37932

### CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"P.E.T.NET PHARMACEUTICAL SERVICES, INC."

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF  
INCORPORATION AND DURATION AS GIVEN ABOVE;  
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE  
EXISTENCE OF THE CORPORATION HAVE BEEN PAID;  
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND  
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

FOR: REQUEST FOR CERTIFICATE

ON DATE: 02/02/00

FROM:  
P.E.T. NET PHARMACEUTICAL SERVICES CORP  
810 INNOVATION DRIVE  
KNOXVILLE, TN 37932-2571

RECEIVED: <sup>FEES</sup> \$1,000.00 \$0.00

TOTAL PAYMENT RECEIVED: \$1,000.00

RECEIPT NUMBER: 00002610673  
ACCOUNT NUMBER: 00272100

*Riley C Darnell*

RILEY C. DARNELL  
SECRETARY OF STATE

