

F010000001183

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Koslow Practice Management Inc.
(Name of corporation - must include suffix)

MJH

Dear Sir or Madam:

00789-00524-00471
R/A Signature/Original

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: 500003481935--4

Jeanette Reynolds-Danneberger
(Name of Person)

-11/30/00--01100--003
*****70.00 *****70.00

W-28701

A.J. Santye Co.
(Firm/Company)

36 E. Main St
(Address)

Somerville, N.J. 08876
(City/State and Zip code)

For further information concerning this matter, please call:

Jeanette Danneberger at (908) 704-1400
(Name of Person) (Area Code & Daytime Telephone Number)

01 MAR - 1 PM 4:40

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration 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



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

December 6, 2000

JEANETTE REYNOLDS-DANNEBERGER
A.J. SANTYE CO.
36 E. MAIN ST.
SOMERVILLE, NJ 08876

SUBJECT: KOSLOW PRACTICE MANAGEMENT, INC.
Ref. Number: W00000028701

We have received your document for KOSLOW PRACTICE MANAGEMENT, INC. and your check(s) totaling \$70.00. 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 \$2,300.00. X

A brief description of the entity's nature of business must be included in the document. ✓

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

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable. ✓

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: 100A00061678



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 7, 2001

JEANETTE REYNOLDS-DANNEBERGER
A.J. SANTY CO.
36 E. MAIN ST.
SOMERVILLE, NJ 08876

SUBJECT: KOSLOW PRACTICE MANAGEMENT, INC.
Ref. Number: W00000028701

We have received your document for KOSLOW PRACTICE MANAGEMENT, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Registered Agent's signature must be original.

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

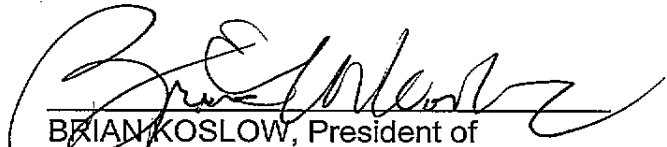
Letter Number: 501A00007555

CORRECTIVE AMENDMENT TO
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION
TO TRANSMIT BUSINESS IN FLORIDA

The following is submitted to correct an error on the original application of KOSLOW PRACTICE MANAGEMENT, INC., a New Jersey corporation, for the authority to transmit business in Florida:

1. Item No. 6 on the Application by Foreign Corporation for Authorization to Transmit Business in Florida submitted by KOSLOW PRACTICE MANAGEMENT, INC. is not correct. "1998" should be deleted and "upon qualification" inserted.
2. KOSLOW PRACTICE MANAGEMENT, INC. is not doing business in Florida and has not transmitted business in Florida.

Dated: 1/28/01


BRIAN KOSLOW, President of
KOSLOW PRACTICE MANAGEMENT, INC.

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

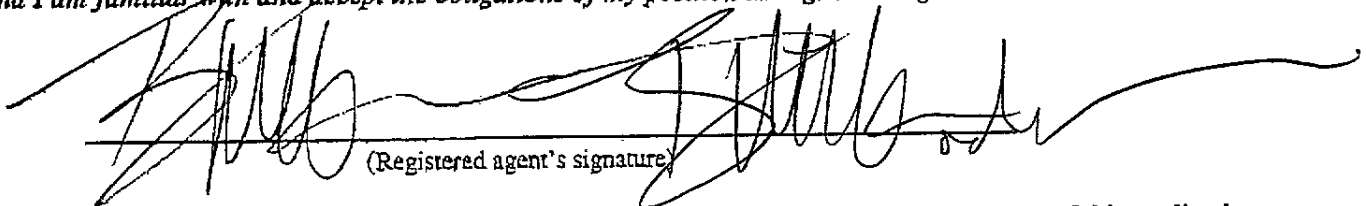
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Koslow Practice Management 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. 22-3109488
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 5/1/91 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 1998
(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. 1112 Weston Rd, Suite 226, Weston, FL 33326
(Principal office address)
1112 Weston Rd Suite 226, Weston, FL 33326
(Current mailing address)
8. CONSULTING
(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: Brian Koslow
Office Address: 1112 Weston Rd, Suite 226
Weston, Florida 33326
(City) (Zip code)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 MAR - 1 PM 4:40

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.


(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: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Brian M. KoslowAddress: ~~2446 Provence Circle~~ 1112 Weston Rd, Suite 226
~~Ft. Lauderdale, FL 33326~~ Weston, FL 33326Vice President: Henry KoslowAddress: ~~2446 Provence Circle~~ 1112 Weston Rd, Suite 226
~~Ft. Lauderdale, FL 33326~~ Weston, FL 33326

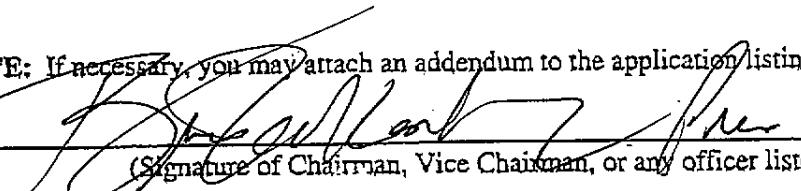
Secretary: _____

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)

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

KOSLOW PRACTICE MANAGEMENT, 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 1, 1991.*

*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.*

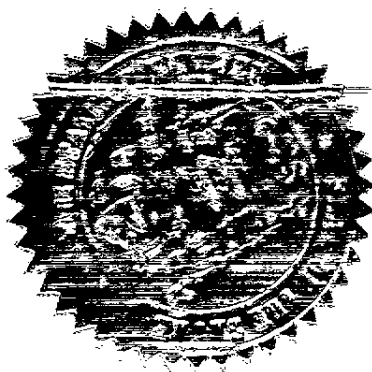
*I further certify that the registered agent and
registered office are:*

Brian M Koslow
155 Lake Street
Ramsey, NJ 07446

Continued on next page . . .

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

KOSLOW PRACTICE MANAGEMENT, INC.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
18th day of January, 2001

Roland M Machold

Roland M Machold
Treasurer