

# F01000003193

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ADVANCED MEDICAL TECHNOLOGIES, INC  
(Name of corporation - must include suffix)

Dear Sir or Madam:

00855-00647-02963

W01-12/30

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:

300004326823--1  
-05/29/01--01166--020  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

DONALD T. BRUMLIK

(Name of Person)

ADVANCED MEDICAL TECHNOLOGIES, INC

(Firm/Company)

735 SAINT ALBANS DRIVE

(Address)

BOCA RATON, FL 33486

(City/State and Zip code)

For further information concerning this matter, please call:

DONALD T. BRUMLIK at (561) 392-7726

(Name of Person)

(Area Code & Daytime Telephone Number)

### 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

FILED  
01 JUN 18 PM 4:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

June 1, 2001

DONALD I BRUMLIK  
ADVANCED MEDICAL TECHNOLOGIES, INC.  
735 SAINT ALBANS DRIVE  
BOCA RATON, FL 33486

SUBJECT: ADVANCED MEDICAL TECHNOLOGIES INC.  
Ref. Number: W01000012136

We have received your document for ADVANCED MEDICAL TECHNOLOGIES INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

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 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: 301A00033260

**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. ADVANCED MEDICAL TECHNOLOGIES, 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. NEVADA 3. 98-0206212  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 02/02/99 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION  
(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. 735 SAINT ALBANS DRIVE, BOCA RATON, FL 33486  
(Principal office address)

\_\_\_\_\_  
(Current mailing address)

8. ALL BUSINESS  
(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)

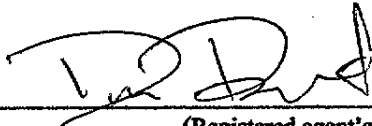
Name: DONALD J. BRUMLIK

Office Address: 735 SAINT ALBANS DR  
BOCA RATON, Florida 33486  
(City) (Zip code)

FILED  
01 JUN 18 PM 4:03  
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.*



\_\_\_\_\_  
(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: DONALD J. BRUMLIK

Address: 735 SAINT ALBANS DRIVE

BOCA RATON, FL 33486

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

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

B. OFFICERS

President: DONALD J. BRUMLIK

Address: 735 SAINT ALBANS DRIVE

BOCA RATON, FL 33486

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

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

Secretary: DONALD J. BRUMLIK

Address: 735 SAINT ALBANS DR, BOCA RATON, FL 33486

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

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

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

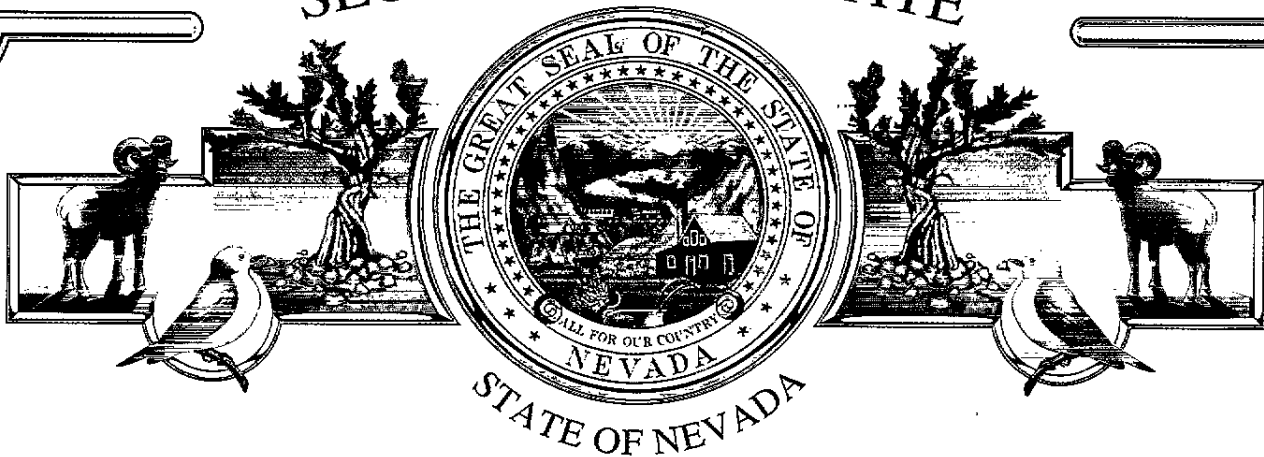
13.  \_\_\_\_\_

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

14. DONALD J. BRUMLIK - PRESIDENT

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

# SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **ADVANCED MEDICAL TECHNOLOGIES INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since February 3, 1999, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on June 11, 2001.



*Dean Heller*

Secretary of State

By

*Matthew Hoffman*  
Certification Clerk