FOR OCOO 4133

TO: Registration Section Division of Corporations Division of Corporations Division of Corporations	
SUBJECT:	
(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:	
JORGE DELGADO	
(Name of Person)	-
(Firm/Company)	_
7455 SW 164 STREET	
(Address)	
MIAMI EL 33157	
(City/State and Zip code)	
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For further information concerning this matter, please call:	
JORGE DELGADO at (305) 431 2873	
(Name of Person) (Area Code & Daytime Telephone Number)	
(Name of Person) (Area Code & Daytime Telephone Number) STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 (Area Code & Daytime Telephone Number) 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 & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status Certified Copy S87.50 Filing Fee, Certified Copy 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	PHYMAX, INC.	
WOLUS OF AUD	orporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or breviations of like import in language as will clearly indicate that it is a corporation instead of a on or partnership if not so contained in the name at present.)	
-	ELAWARE 3.	- - - -
(State of cou	ountry under the law of which it is incorporated) (FEI number, if applicable)	•
4	11-7-97 5. PERPETUAL	
(I	Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	25
6	upon qualification	
(Date first tran	ansacted 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.)	<u> </u>
7. 5200	N OCEAN BLVD #1408 FT LANDERDALE FL 33308	·
	(Principal office address)	:
	Same as principal office	
	(Current mailing address)	
8. <u> </u>	lanagement services	! 9
(Purpos	ose(s) of corporation authorized in home state or country to be carried out in state of Florida)	Ĭ
	street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
Name:	JORGE DELGADO	
Office Address:	: 7455 SW 164 STREET	
	MIAMI , Florida 33157	-
	(City) (Zip code)	N:
10. Registered	d 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: RICKY J RUBIN
Address: 5200 N OCEAN BLUD #1408
FT LAUDERDALE FL 33308 Vice Chairman: JORGE D. DELGADO
Vice Chairman: JOZGE D. DELGADO
Address: 5200 N OCEAN BLUD #1408
- FT LAUDERDALE FL 33308
Director:
Address:
Director:
Address:
Address: SZOO N OCEAN BUND #1408
TT LANDERDALE FL 33308
Vice President: JORGE D. DELGADO
Address: 5200 N OCEAN BLUD #1408
FT LANDERDALE FL 33308
Address: 5200 N OCEAN BUD # 1408 FT LANDERDALE FL 33308
Treasurer: JORGE D. DELGADO
Address: 5200 N DEEAN BUND #1408 HT LANDERDALE FL 33308
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)
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(1) ped of printed hame and capacity of person signing application)

State of Delaware

Office of the Secretary of State

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PHYMAX, INC." 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 SIXTEENTH DAY OF JULY, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PHYMAX, INC." WAS INCORPORATED ON THE SEVENTH DAY OF NOVEMBER, A.D. 1997.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

01 AUG -1 AM 9: 58

Warriet Smith Windson, Secretary of State

AUTHENTICATION: 1245190

DATE: 07-16-01

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