F0100005107"

TRANSMITTAL LETTER

LANIPRIN LIFE SCIENCES INC.
(Name of corporation - must include suffix)

TO:

Registration Section
Division of Corporations

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. 4000046138547
Please return all correspondence concerning this matter to the following: -09/27/0101068009 *****78.75 *****78.75
STEVEN ZELDIN
(Name of Person)
LANIPRIN LIFE SCIENCES INC. (Firm/Company)
1900 S, OCEAN BLUD # SE
(Address)
POMPANO BEACH FLORIDA 33034
(City/State and Zip code)
For further information concerning this matter, please call:
STEVEN ZELDIN at (954) 415-7894 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
FII AHASS AHASS
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations Division of Corporations
409 E. Gaines St. Tallahassee, FL 32399 P.O. Box 6327 Tallahassee, FL 32314
Ynt.
Enclosed is a check for the following amount:
□ \$70.00 Filing Fee \$ \$78.75 Filing Fee & □ \$78.75 Filing Fee & Certificate of Status Certified Copy 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. LIFE SCIENCES 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.) (Date of incorporation)

5. PERPETURE
(Duration: Year corp. will cease to exist or "perpetual") (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.) BLVD. SUTE SE, POMPANO BEACH FT 33034
(Principal office address) SAME (Current mailing address) FOR PROFIT, ANY LEGAL PURPOSE
(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 acce Name: STEVEN ZELDIN 1900 S. OCEAN BLUD. #5E

Pompano BEACH, Florida 3303
(City) (Zip code) Office Address: 1900 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.

A. DIRECTORS Chairman: STEVEN ZELDIN Address: 1900 S. OCEAN BLUD., SUITE SE POMPANO BEACH FL 33034 Vice Chairman: Address: Director: ADOLFO J. HERNANDEZ Address: 225 N.E. MIZNER BLUD BOCA RATON FL 33432 Director: BERNARD L. KATZ Address: 31 CRAIGMONT DR. TORONTO ONTAKIO CANADA M2H **B. OFFICERS** President: STEVEN ZELDIN Address: 1900 S. OCEAN BLUD., SUITE SE POMPANO BEACH FL 33034 Vice President: Secretary: Address: Treasurer: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) STEVEN ZELDIN, CHAIRMAN
(Typed or printed name and capacity of person signing application)

12. Names and business addresses of officers and/or directors:



STATE OF COLORADO

DEPARTMENT OF STATE

CERTIFICATE

I, DONETTA DAVIDSON, SECRETARY OF STATE OF THE STATE OF COLORADO HEREBY CERTIFY THAT

ACCORDING TO THE RECORDS OF THIS OFFICE

LANIPRIN LIFE SCIENCES INC. (COLORADO CORPORATION)

FILE # 19981066078 WAS FILED IN THIS OFFICE ON April 08, 1998 AND HAS COMPLIED WITH THE APPLICABLE PROVISIONS OF THE LAWS OF THE STATE OF COLORADO AND ON THIS DATE IS IN GOOD STANDING AND AUTHORIZED AND COMPETENT TO TRANSACT BUSINESS OR TO CONDUCT ITS AFFAIRS WITHIN THIS STATE.

Dated: September 17, 2001

RY OF STATE
SEE, FLORIDA

Donetta Davidson

SECRETARY OF STATE