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CORPORATION(S) NAME			<u> </u>
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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

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.	Cohen Brow	n Management Group, Inc.								
	(Name of cor words or abbi	poration; must include the word "INC eviations of like import in language a cor partnership if not so contained in	s will clearly	v indicate tha	PANY", "COR t it is a corpora	PORATION"	or fa	 ·		. = *
2.	California		, 3,	95-337-2818	3				£-2 :-	,
	(State or cour	ntry under the law of which it is incor	orated)		(FEI numb	er, if applicat	le)	_		
4.	05/08/79		5.	Perpetual						
	(D	ate of incorporation)		(Duration:	Year corp. wil	l cease to exis	t or "perpetual")			
6.	01/01/2001									
		sacted business in Florida. If corpora (SEE SECTION	S 607.1501,	transacted by	isiness in Flori ad 817.155, F.S	da, insert "upo	on qualification;"	OI DEC		
/.	11444 W. O.S	mpic Blvd. 5th Floor, Los Angeles,	CA 90064 l office addr				<u>. SA</u>	ယ	- =	
		(Frincipa	omce addr	ess)			EO EA	P	Ë	
<u>s</u>	ame					:				
		(Current)	nailing addr	ess)			SS	÷:		
8.	_	training, education		: =		. · .		-1		
	(Purpose	e(s) of corporation authorized in home	state or cou	intry to be ca	rried out in sta	te of Florida)		-	4	
9. 1		reet address of Florida register								
	THE CAME DE	rect udaress of Florida register	u agent: (,r.O. box o	r iviaii Drop E	sox <u>NUT</u> acc	eptable)			
	Name:	C T Corporation System					,			· ·
Offi	ice Address:	1200 South Pine Island Road	<u> </u>							
		Plantation		, Florid	a 33324					
		(City)			(Zip code)	•			. •
Hav	ing been na	agent's acceptance: med as registered agent and to ac	cept servic	e of process	s for the abov	e stated corp	oration at the	place		
uest,	gnaiea in Thi	s application, I hereby accept the	appointm.	ent as regis	tered agent a	nd agree to a	ict in this capa	city.	I	

H 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.

DAVID I. FARBER ASSISTANT SECRETARY (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: Edward G. Brown				<u></u>
Address: 11444 W. Olympic Blvd. 5th Floor				
Los America CA 00064				
Vice Chairman:				· · · · · · · · · · · · · · · · · · ·
Address:				·
· · · · · · · · · · · · · · · · · · ·	<u>.</u> <u>.</u>		. : '.aw	<u> </u>
Director:	φ		-	
Address:			<u> </u>	
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Director:			<u>≑</u> u	
Address:	£		3	SSE SSE
B. OFFICERS SEE ATTACHMENT		, <u>, , , , , , , , , , , , , , , , , , </u>		
				7
President:				
Address:				
Vice President: Lora Ricca				
Address: 11444 W. Olympic Blvd. 5th Floor	- Many	<u> </u>	d har	
Los Angeles, CA 90064			'UTB	<u> </u>
Secretary:		<u> </u>	Lagar Land	· · · · · · · · · · · · · · · · · · ·
Address:		5:	121.	- 11 . A
Treasurer:		<u>.</u>	<u> </u>	
Address:	<u>. . .</u>			
NOTE: If necessary, you may attach an adder turn to the ap (Signature of Chairman, Vice Chairman, or a	•			
14. Riben S. Rubinstein, CPA	· _			
(Typed or printed name and capacity	of person si	get Fnanc	IAL C	HICER

3 7.7

Attachment to Florida Application By Foreign Corporation for Authorization to Transact Business In Florida

Officers & Directors

1. Full Name:
Officer/Director:
Officer's Title:
Director's Title:
Business Address:

City: State: ZIP Code:

2. Full Name:
Officer/Director:
Officer's Title:
Director's Title:
Business Address:

City: State: ZIP Code:

3. Full Name:
Officer/Director:
Officer's Title:
Business Address:
City:

City: State: ZIP Code:

4. Full Name:
Officer/Director:
Officer's Title:
Business Address:

City: State: ZIP Code: Edward G. Brown
Officer, Director
Co-Chief Executive Officer
Chairman
11444 W. Olympic Blvd. 5th Floor
Los Angeles

CA

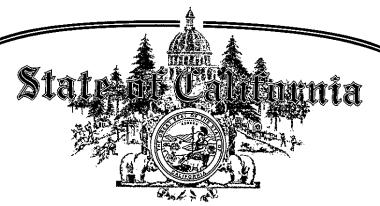
90064

Martin L. Cohen, M.D.
Officer, Director
Co-Chief Executive Officer
Chairman
11444 W. Olympic Blvd. 5th Floor
Los Angeles
CA
90064

Lora Ricca
Officer
Executive Vice President
11444 W. Olympic Blvd. 5th Floor
Los Angeles
CA
90064

Ruben S. Rubinstein, CPA

Officer
Chief Financial Officer
11444 W. Olympic Blvd. 5th Floor
Los Angeles
CA
90064



SECRETARY OF STATE CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BILL JONES, Secretary of State of the State of California, hereby certify:

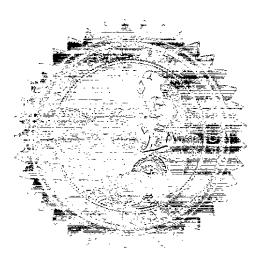
That on the 8TH day of MAY, 1979, COHEN-BROWN MANAGEMENT GROUP, INC. became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of December 27, 2001.

BILL JONES Secretary of State