F0200001518

TRANSMITTAL LETTER

5	TO: Registra Division	ntion Section n of Corporations						
	SUBJECT: Health care Vision, Inc. (Name of corporation - must include suffix)							
:	SUBJECT: _	(Name o	of corporation	- must include s	uffix)			
	Dear Sir or Mad	dam:						
	Granting for Authorization to Transact Business in Florida",							
	"Certificate of Existence", and check are submitted to register and the							
	to transact business in Florida.							
	Please return a	ll correspondence concerning	ng this matter	to the following:	•			
	<u>J.</u>	erry Graves			l same	00505		
		erry Graves	(Name of	Person)	TUU	-03/11/02	01039(004
•	He	atthcare Vision,	(Firm/Cor	npany)	· ·	_***** 7 131	□{ - *** **	ເດ າ ດດ້
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	- 		(City/State	and Zip code)	<u>6_ 10- mb</u> 75- 7	***2300.	00 ***230	00.00
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	For further in	formation concerning this n	natter, please	call:			CRE	,
	100	me of Person) Diress:	31.817	15815	6PP8	ext 28	02 MAR 27 PM 3: 02 SECRETARY OF STATE VLLAHASSEE, FLORID	
	(Nar	me of Person)	(Area	Code & Daytim	e Telephon	e Number)		FILED
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		nympee.		MAILING A	DDRESS:		RIDA	>
Name Availability	STREET Al Registration	Section		I/OE IOU OEVO				
Availability	Division of	Corporations		Division of O P.O. Box 633		S		
Document	409 E. Gaine	es St.		Tallahassee,	FL 32314	#4¥		
Examiner	Tallahas 3000	FL 32399		,	i d	1 A	$QQDE_{c}$	<u> </u>
Updater	Enclosed is	à check for the following an	mount:		, F			
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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 14, 2002

JERRY GRAVES
HEALTHCARE VISION, INC.
2601 SCOTT AVENUE, SUITE 600
FT WORTH, TX 76103

SUBJECT: HEALTHCARE VISION, INC.

Ref. Number: W02000007140

We have received your document for HEALTHCARE VISION, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

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.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing Corporate Specialist

Letter Number: 102A00015364

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.	: Healthcare Vision 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.							
	(State or country under the law of which it is incorporated) (FEI number, if applicable)						
4.	(Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")	-					
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")						
6.	(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.	2601 Scott Avenue Suite 600 Pt worth Tx 76103						
	(Principal office address)						
	2601 Scott Avenue Suite 600 Fhooth TY 7610 By S (Current mailing address)						
	(Current mailing address) (Current mailing address) AAA N						
8							
-	(Purpose(s) of corporation audiorized in nome state of country to be carried out in state of 1 fortillary						
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable 2							
	Name: David Pippin (HCC)	5. .					
C	Office Address: 9325 BAY PLAZA BLUD #205	:					
	TAMPA , Florida 336/9	-					
	(City) (Zip code)						

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: Rex Axers	
Address: 2601 Scott Ave Ste 600	

Vice Chairman:	
Address:	
	Jacobs Communication
Director: Tray ward	
Address: 4601 Scott Are Ste 600	
Hrvar Tx 76103	The second of the first se
Director:	
Address:	1 - : - : - : - : <u>- : : : : : : : : : : </u>
B. OFFICERS	ECR LLA
President: Jarry Graves	HAS
Address: 2601 Scott Ave Ste 600	P. ED
FAWORA TY 76103	FST &
Vice President:	D2 RIDA
Address:	1 4 ·
	4. 12
Secretary: Tracy word	
Address: 260 Scoxx Are Ste 600 Ptus	Th T6076103
Treasurer: Treasurer:	1
Address: 2601 Scott Are Ste 600 Ftwo Treasurer: Tracy word Address: 2601 Scott Are Ste 600 Ftwork.	The Thisz
NOTE: If necessary, you may attach an addendum to the application listing addition	
(Signature of Chairman, Vice Chairman, or any officer listed in num	nher 12 of the application
14. Tracy ward Sec-Track (Typed or printed name and capacity of person signing appl	" - " " " " " " " " " " " " " " " " " "
(Typed or printed name and capacity of person signing appl	lication)



Gwyn Shea Secretary of State

Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for HEALTHCARE VISION, INC. (filing number: 142818600), a Domestic Business Corporation, was filed in this office on January 03, 1997.

It is further certified that the entity status in Texas is active.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 28, 2002.

Gwyn Shea Secretary of State



PHONE(512) 463-5555

Prepared by: Virginia Suniga