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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BETTER HOSPITAL EQUIPMENT CORPORATION
(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:

Teresa V. Batter, President

(Name of Person)

Better Hospital Equipment Corp.

(Firm/Company)

55 Maple Avenue, Suite 300

(Address)

Rockville Centre, NY 11570

(City/State and Zip code)

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-04/02/02--01066--002
****87.50 ****87.50

W02-0500

For further information concerning this matter, please call:

Teresa V. Batter

(Name of Person)

at (516) 594-0132

(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

02 APR 15 PM 12:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

4-16-02



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

April 4, 2002

TERESA V. BATTER
BETTER HOSPITAL EQUIPMENT CORP.
55 MAPLE AVE., STE. 300
ROCKVILLE CENTRE, NY 11570

SUBJECT: BETTER HOSPITAL EQUIPMENT CORP.
Ref. Number: W02000009506

We have received your document for BETTER HOSPITAL EQUIPMENT CORP. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following:

A brief description of the entity's nature of business must be included in the document.

Please return your document, along with 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) 245-6025.

Trevor Brumbley
Document Specialist

Letter Number: 802A00019887

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 APR 15 PM 12:10

APPROVED
AND
FILED

**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. BETTER HOSPITAL EQUIPMENT CORP.
(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. NEW YORK 3. 113089802
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. May 16, 1991 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. 55 Maple Avenue, Rockville Centre, NY 11570
(Principal office address)
55 Maple Avenue, Rockville Centre, NY 11570
(Current mailing address)
8. resale of medical supplies and accessories
(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: Mrs. Angela Andrade/ UNICASA
Office Address: 9869 Pines Boulevard
Pembroke Pines, Florida 33024
(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.

Angela Andrade
(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.

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TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Teresa V. Batter

Address: 70 Oak Neck Lane, West Islip, NY 11795

Vice President: _____

Address: _____

Secretary: Harvey M. Batter

Address: 70 Oak Neck Lane, West Islip, NY 11795

Treasurer: Harvey M. Batter

Address: 70 Oak Neck Lane, West Islip, NY 11795

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TALLAHASSEE, FLORIDA

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

13. Teresa V. Batter, Pres.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. TERESA V. BATTER, PRESIDENT
(Typed or printed name and capacity of person signing application)

**State of New York } ss:
Department of State**

I hereby certify, that the Certificate of Incorporation of BETTER HOSPITAL EQUIPMENT CORP. was filed on 05/16/1991, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 22nd day of March
two thousand and two.*

Special Deputy Secretary of State

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APPROVED
AND
FILED