

FO2000005437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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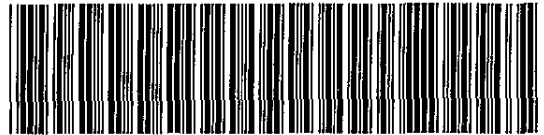
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DEPT. OF STATE

DIVISION OF CORPORATE AFFAIRS

TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AND  
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JB  
10-30-02

**CT CORPORATION**

CORPORATION(S) NAME

1) Health Watch, Inc.

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Profit   | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> Nonprofit           |   |   |
| <input checked="" type="checkbox"/> Foreign  | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
|  | <input type="checkbox"/> Reinstatement          |   |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input type="checkbox"/> LLC                 | <input type="checkbox"/> Name Registration      | <input type="checkbox"/> Change of RA       |
|  | <input type="checkbox"/> Fictitious Name        | <input type="checkbox"/> UCC                |
| <input type="checkbox"/> Certified Copy      | <input type="checkbox"/> Photocopies            | <input type="checkbox"/> CUS                |
| <input type="checkbox"/> Call When Ready     | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In  | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out            |   |   |

Name \_\_\_\_\_  
 Availability \_\_\_\_\_  
 Document \_\_\_\_\_  
 Examiner \_\_\_\_\_  
 Updater \_\_\_\_\_  
 Verifier \_\_\_\_\_  
 W.P. Verifier \_\_\_\_\_

10/23/02

Order#: 5616684

Ref#: \_\_\_\_\_

***File First***

Amount: \$ \_\_\_\_\_

660 East Jefferson Street  
 Tallahassee, FL 32301  
 Tel. 850 222 1092  
 Fax 850 222 7615

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

02 OCT 23 PM 1:00

APPROVED  
 AND  
 FILED



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State

October 23, 2002

CT CORPORATION SYSTEM

SUBJECT: HEALTH WATCH, INC.  
Ref. Number: W02000030572

We have received your document for HEALTH WATCH, 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:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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: 502A00058619

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TALLAHASSEE, FLORIDA

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**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. HEALTH WATCH, 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. NEVADA  
(State or country under the law of which it is incorporated)
3. APPLIED FOR  
(FEI number, if applicable)
4. 09-27-02  
(Date of incorporation)
5. PERPETUAL  
(Duration: Year corp. will cease to exist or "perpetual")
6. UPON FILING  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 3200 NORTH FEDERAL HIGHWAY, STE 121, BOCA RATON, FL 33431  
  
(Current mailing address)
8. ALL LEGAL ACTIVITIES  
(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: Rocco Coviello  
  
Office Address: 3200 N. Federal Highway, Suite 121  
Boca Raton, Florida, 33431  
(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.*

CT Corporation System

Rocco Coviello  
(Registered agent's signature) Rocco Coviello

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 addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

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TALLAHASSEE, FLORIDA

## RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned Robert D. Coviello, do hereby certify  
(Name)

that this Resolution of the Board of Directors of Health Watch, Inc.

(Corporate Name)

a corporation duly organized and existing under the laws of the State of Nevada

was duly adopted on October 25, 2002

Be it resolved, that Health Watch, Inc.  
(Corporate Name)

organized and existing in the State of Nevada, hereby adopts the name  
HGH Worldwide, Inc. for use in Florida.

Dated: October 25, 2002

  
Signature of either Chairman, Vice Chairman or any officer

ROBERT D. COVIELLO, President  
Type or print name

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

ING1519(1/00)

AND  
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02 OCT 23 PM 1:00  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**A. DIRECTORS (Street address only - P.O. Box NOT acceptable)**

Chairman: ROBERT D. COVIELLO

Address: 3 IMPERIAL PROMENADE, STE 420, SANTA ANA, CA 92707

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: ROCCO COVIELLO

Address: 3200 NORTH FEDERAL HIGHWAY, STE 121, BOCA RATON, FL 33431

Director: MICHAEL AHDERS

Address: 3200 NORTH FEDERAL HIGHWAY, STE 121, BOCA RATON, FL 33431

**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**

President: ROBERT D. COVIELLO

Address: 3 IMPERIAL PROMENADE, STE 420, SANTA ANA, CA 92707

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: ROCCO COVIELLO

Address: 3200 NORTH FEDERAL HIGHWAY, STE 121, BOCA RATON, FL 33431

Treasurer: ROCCO COVIELLO

Address: 3200 NORTH FEDERAL HIGHWAY, STE 121, BOCA RATON, FL 33431

**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)

14. \_\_\_\_\_

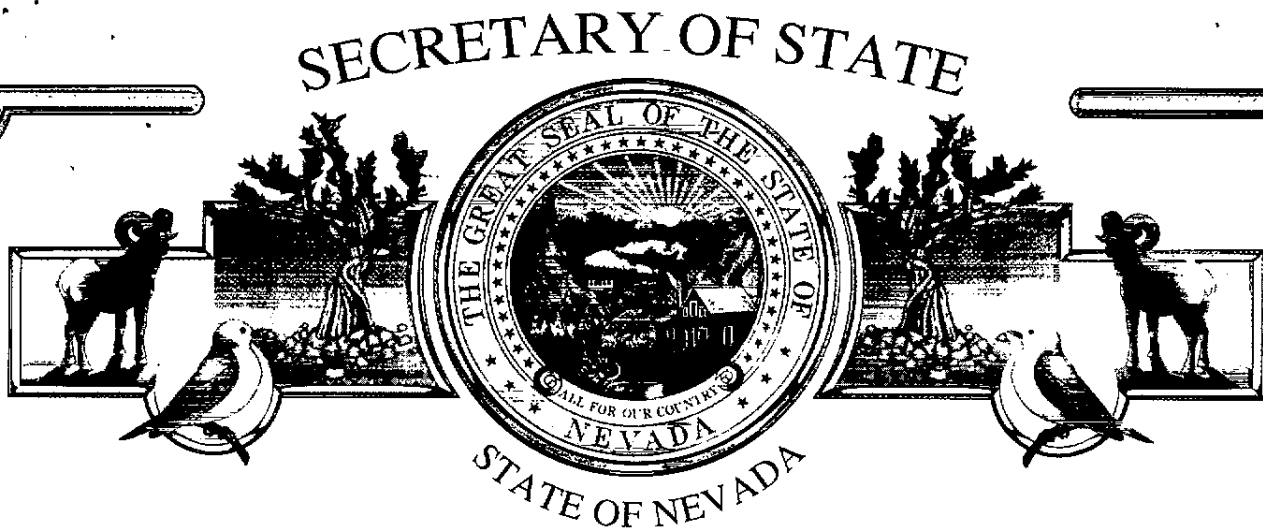
Robert D. Coviello, Chairman

(Typed or printed name and capacity of person signing application)

02 OCT 23 PM 1:00  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301

FILED

AND



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **HEALTH WATCH, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since September 27, 2002, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand  
and affixed the Great Seal of State, at my office, in  
Carson City, Nevada, on September 30, 2002.



*Dean Heller*

DEAN HELLER  
Secretary of State

By

*C. J. Smith*  
Certification Clerk