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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: PEARSON DENTAL SUPPLIES, INC
(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:
KEYHAN KASHFIAN (Name of Person)
(Name of Person)
PEARSON DENTAL SUPPLIES INC - TOPE TO
(Firm/Company)
13/61 TELFAIR AVE
SYLMAR, CA 9/342 (City/State and 7in code)
SYLMAR, CA 9/342
(City/State and Zip code)
For further information concerning this matter, please call:
Emphim Barati 21 (818) 345-8363
(Name of Person) at (818) 345-8363 (Area Code & Daytime Telephone Number)
STREET ADDRESS: MAILING ADDRESS:
Registration Section Division of Corporations Registration Section Division of Corporations
409 E. Gaines St. P.O. Box 6327
Tallahassee, FL 32399 Tallahassee, FL 32314
Enclosed is a check for the following amount:
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status □ Certified Copy □ Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FOREIGN CORPORATION TO TRANSAG	CT BUSINESS IN THE STATE OF FLORIDA.
1. PEARSON DENTAL SUPPL	LIES INC.
1. PEARSON DENTAL SUPPL (Name of corporation; must include the word "INCORPOR words or abbreviations of like import in language as will cl natural person or partnership if not so contained in the name	CT BUSINESS IN THE STATE OF FLORIDA. ATED", "COMPANY", "CORPORATION" of the early indicate that it is a corporation instead of a eat present.) 3. 95-39//7/1
2. CALIFORNIA (State or country under the law of which it is incorporated)	3. 95-3911712
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. <u>16, Feb, 1983</u>	5. PERPCETUAL (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION	not transacted business in Florida, insert "upon qualification.")
(Date first transacted business in Florida. If corporation has (SEE SECTIONS 607.1	s not transacted business in Florida, insert "upon qualification.") 1501, 607.1502 and 817.155, F.S.)
7 3533 Mercy Dr. Drlands	72808
7. 3533 Mercy Dr. Orlando, (Principal office	
13/61 TELFAIR AVE, SYLMA (Current mailing	1R, CA 9/342
(Current mailing	address)
8. Retails whole sale of Dentals (Purpose(s) of corporation authorized in home state of	Medical Supplies and related Activities or country to be carried out in state of Florida
9. Name and street address of Florida registered age	
Name: Ronald M Zepp	
Office Address: 3533 Mercy Dr.	· · · · · · · · · · · · · · · · · · ·
	, Florida <u>39808</u> (Zip code)
designated in this application, I hereby accept the appo	ervice of process for the above stated corporation at the place intment as registered agent and agree to act in this capacity.
lutiner agree to compty wan the provisions of all statut luties, and I am familiar with and accept the obligation	es relative to the proper and complete performance of my as of my position as registered agent.
	<u>-</u>
	7 -
Juni 1	
(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 dusiness addresses of officers and/or di	rectors:
A. DIRECTORS	
Chairman: KEYHAN KASHFIAN	
Address: 13161 TELFAIR AVE, SYLP	1AR, GA 91342
Vice Chairman: PARVIZ KASHIFIAN	_
Address: SAME	
	770, 70, 7
Director: NADER, KASHFIAN	THE
Address: SAME	
Director:	975
Address:	
B. OFFICERS	
President: KEYMAN KASHFIAN	
Address: 13161 TECFAIR AVE	· · · · · · · · · · · · · · · · · · ·
SYLMAR, CA 91342	
Vice President: PARVIZ KASHFIAN	
Address: 13161 TECFAIR AVE	
SYLMAR, CA 91342	=
Secretary: NADER KASHFIAN	
Address: 13 161 TEL FAIR AVE	
Treasurer: KEYHAN KASHIZIAN	
Address: SAMC	
NOTE: If necessary, you may attach an addendum to the	application listing additional officers and/or directors.
13. Nahrtock	=
	r any officer listed in number 12 of the application)
14. NADER KASHFIAN, SECT (Typed or printed name and capacity)	
(1) ped or primed name and capaci	my or person signing appreamon)



SECRETARY OF STATE CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, KEVIN SHELLEY, Secretary of State of the State of California, hereby certify:

That on the **16th day of February, 1983, PEARSON DENTAL SUPPLIES, 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 February 6, 2003.

KEVIN SHELLEY Secretary of State

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