

F03000005332

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

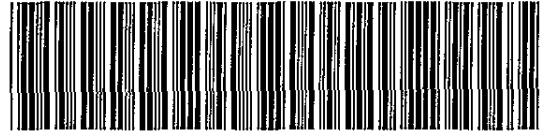
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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FILED
10/08/03
10:19 AM
10/08/03

F03-5332
OK



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

October 15, 2003

ARMAND DAUPLAISE
1630 WINTER SPRINGS BLVD.
WINTER SPRINGS, FL 32708

SUBJECT: PN LABS, INC.
Ref. Number: W03000029816

We have received your document for PN LABS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 703A00056192

PNLABS, INC.

1630 Winter Springs Boulevard • Winter Springs, FL 32708 • (407) 977-1005 • Fax (407) 977-1186

October 20, 2003

Tammi Cline
Document Specialist
Florida Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: PNLabs, Inc. / Ref. Number W03000029816

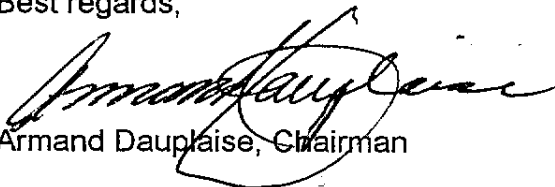
Dear Ms. Cline:

This is in response to your letter of October 15, a copy of which is enclosed.

I have also enclosed the requested document with the original signature and the original "certificate of existence with status in good standing" dated as of September 8, 2003.

I apologize for the incorrect filing and thank you for expediting the processing.

Best regards,


Armand Dauplaise, Chairman

Enclosures

FILED
OCT 21 11:21
TALLAHASSEE, FLORIDA
STATE DIVISION OF CORPORATIONS

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PN LABS, 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:

Armand Dauplaise
(Name of Person)

PN LABS, INC.
(Firm/Company)

1630 Winter Springs Blvd.
(Address)

Winter Springs, FL 32708
(City/State and Zip code)

For further information concerning this matter, please call:

Armand Dauplaise at (407) 977-1005
(Name of Person) (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

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

CORPORATION
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. PN LABS, INC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NEVADA (State or country under the law of which it is incorporated) 3. (FEI number, if applicable)

4. September 8, 2003 (Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")

6. September 11, 2003 (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. 1630 Winter Springs Blvd., Winter Springs, Florida 32708 (Principal office address)

1630 Winter Springs Blvd., Winter Springs, Florida 32708 (Current mailing address)

8. SALE OF VITAMINS (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: Irwin J. Newman, Esq.

Office Address: 2101 NW Corporate Blvd., Suite 414

Boca Raton, Florida 33431 (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: ARMAND DAUPLAISE

Address: 1630 Winter Springs Blvd.
Winter Springs, Florida 32708

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: JEFFREY GILL

Address: 1630 Winter Springs Blvd.
Winter Springs, Florida 32708

Vice President: _____

Address: _____

Secretary: BERNARD SHINDER

Address: 1630 Winter Springs Blvd., Winter Springs, Florida 32708

Treasurer: BERNARD SHINDER

Address: 1630 Winter Springs Blvd., Winter Springs, Florida 32708

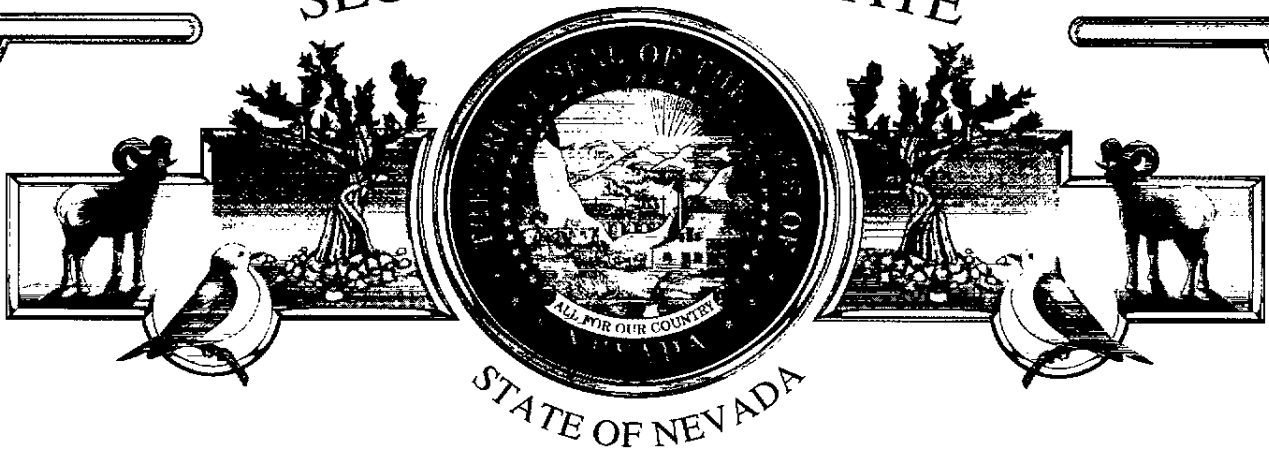
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. *Armand Dauplaise*
(Signature of Director or Officer listed in number 12 of the application)

14. ARMAND DAUPLAISE, CHAIRMAN
(Typed or printed name and capacity of person signing application)

Armand Dauplaise, CHAIRMAN

SECRETARY OF STATE



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, and limited-liability partnerships 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, **PN LABS, 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 8, 2003**, 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 Las Vegas, Nevada, on **September 17, 2003**.



DEAN HELLER
Secretary of State

By

Certification Clerk