

F04 00000 4854

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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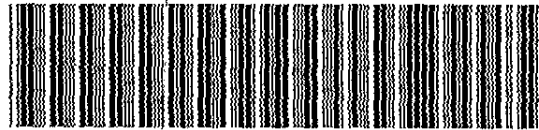
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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just

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Oxygen Required, 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:

George Rhodes

(Name of Person)

Smallberg Sorkin & Company LLP

(Firm/Company)

450 Seventh Avenue, Suite 4202

(Address)

New York, NY 10123

(City/State and Zip code)

For further information concerning this matter, please call:

George Rhodes

(Name of Person)

at ( 212 736-1711

(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

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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. Oxygen Required, 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. New York 3. 20-0406060  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11-20-03 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 4211 North Federal Highway, Suite 1, Pompano Beach, FL 33064  
(Principal office address)

4211 North Federal Highway, Suite 1, Pompano Beach, FL 33064  
(Current mailing address)

The corporation is formed to engage in any lawful act or  
activity for which a corporation may be organized under the  
8. Florida Business Corporation Law  
(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 NOT acceptable)

Name: Michael Demetriou

Office Address: 4211 North Federal Highway, Suite 1  
Pompano Beach, Florida 33064  
(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:

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SECRETARY OF STATE

**A. DIRECTORS**

Chairman: Joseph Hiess

Address: 4211 North Federal Highway, Suite 1  
Pompano Beach, FL 33064

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

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

Director: \_\_\_\_\_

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

Director: \_\_\_\_\_

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

**B. OFFICERS**

President: Joseph Hiess

Address: 4211 North Federal Highway, Suite 1  
Pompano Beach, FL 33064

Vice President: Michael Demetriou

Address: 4211 North Federal Highway, Suite 1  
Pompano Beach, FL 33064

Secretary: Michael Demetriou

Address: 4211 North Federal Highway, Suite 1  
Pompano Beach, FL 33064

Treasurer: Joseph Hiess

Address: 4211 North Federal Highway, Suite 1  
Pompano Beach, FL 33064

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

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Michael Demetriou

(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 OXYGEN REQUIRED, INC. was filed on 11/20/2003, 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 30th day of July  
two thousand and four.*



*Secretary of State*

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