

F04 000005708

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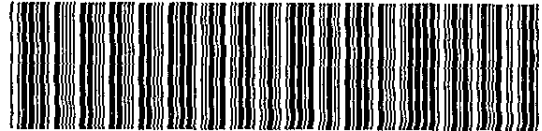
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W04-35482



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09/22/04--01036--005 **70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 OCT - 6 PM 4:03

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

September 24, 2004

DIAN M HOLT
230 HILTON AVE STE. 212A
HEMPSTEAD, NY 11550

SUBJECT: GLOBAL HEALTHCARE STAFFING INC
Ref. Number: W04000035482

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for GLOBAL HEALTHCARE STAFFING INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 404A00056263



BILINGUALS INC.

230 Hilton Ave. Suite 212A • Hempstead, NY 11550 • Tel 516.505.0630 • Fax 516.292.4997
www.bilingualsinc.com

September 21, 2004

Florida Department of State
Registration Section
Division of Corporations
409 E Gaines St.
Tallahassee, FL 32399

To Whom It May Concern:

Attached, pursuant to Florida Statutes for registration of a foreign profit corporation, is the completed application inclusive of the transmittal letter. Also attached is an original certificate of existence dated September 8th, 2004 and check # 1094, in the amount of \$70.00, for the filing fee.

Should you require additional information please do not hesitate to contact the undersigned at (516) 505-0630.

Sincerely,


Dian M. Holt
Comptroller

ADP

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLOBAL HEALTHCARE SHIPPING 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:

Dian M. Holt
(Name of Person)
Bilinguals Inc.
(Firm/Company)
230 Hilton Ave Suite 212A
(Address)
Hempstead NY 11550
(City/State and Zip code)

For further information concerning this matter, please call:

Dian M. Holt at (516) 505-0630
(Name of Person) (Area Code & Daytime Telephone Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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

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. Global Healthcare Staffing 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. 30-0160513
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 9/11/02 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. 230 HILTON AVE #212A HEMPSTEAD NY 11550
(Principal office address)

SAME AS ABOVE
(Current mailing address)

8. GHS Recruits healthcare professionals domestically & Worldwide for placement in educational & medical settings
(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: Barbara Matthewman

Office Address: 1400 NW 110 Ave suite 419
Plantation, Florida 33322
(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.

[Signature]
(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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A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERSPresident: Robert PadronAddress: 33 Chatham PlaceVice President: Dr. TRUMP FONT-PADRONAddress: 33 Chatham PlaceSecretary: ROBERT PADRONAddress: 33 Chatham Place

Treasurer: _____

Address: _____

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

13. Robert Padron

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

14. ROBERT PADRON - PRESIDENT

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

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SEC. OF STATE
TALLAHASSEE, FLORIDA

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

I hereby certify, that the Certificate of Incorporation of GLOBAL HEALTHCARE STAFFING INC. was filed on 09/11/2002, 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 08th day of September
two thousand and four.*



Secretary of State

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