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FOREIGN PROFIT QUALIFICATION

Healthcare Econometrics, Inc.

C-4:5-4			
Certificate of Status	V		
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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. Healthcare	Econometrics, Inc.			
	f corporation; must include "INCORPORAT "Corp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"	
(If name unav	ailable in Florida, coter alternate corporate n		adopted for the purpose of transacting business in	Florida)
.	•		20-0824199	,
·•	ry under the law of which it is incorporated)	_3.	(FEI number, if applicable)	
1/15/2004	•	4	Perpetual	
(1)	ate of incorporation)		(Duration: Year corp. will cease to exist or "per	petual")
U DON	Qualification			
	sacted business in Florida. If corporation has		transacted business in Florida, insert "upon qualif	ication.")
tono Ohaaa	·		, 607.1502 and 817.155, F.S.)	
1229 Chesa	peake Circle, Boynton Beach, Florida 33			
	(Principal office	add	1658)	
4817 Buxto	n Circle, Owings Mills, Maryland 21117			· · · · · · · · · · · · · · · · · · ·
	(Current mailing	add	ress)	
	·		•	
3. Provide ana	lytic and econometric modeling services.			
(Purpose	e(s) of corporation authorized in home state of	OF CC	ountry to be carried out in state of Florida)	
. Name and si	treet address of Florida registered age	nt:	(P.O. Box or Mail Drop Box NOT acceptable)
Name:	Michael Kubica			
	7220 Champaile Cirola		-	74 A
Office Address:	7229 Chesapeake Circle			
	Boynton Beach		, Florida 33436	E THE
	(City)		(Zip code)	SSI - 6
0. Registered	agent's acceptance:			
		ervi	ce of process for the above stated corporation	ally place
			nent as registered agent and agree to act in th	
			elative to the proper and complete performan	cest my dut
na 1 am famus	ar with and accept the obligations of my	po.	sition as registered agent.	> -
	& lock con			
	(Registered agent's signati	uc)		

- 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: Michael Kubica		
Address: 7229 Chesapeake Circle, Boynton Beach, Florida 33436		
Director:		
Address:		
B. OFFICERS President: Michael Kubica Address: 7229 Chesapeake Circle, Boynton Beach, Florida 33436		
Vice President: Michael Kubica		
Address: 7229 Chesapeake Circle, Boynton Beach, Florida 33436		
Secretary: Michael Kubica Address: 7229 Chesapeake Circle, Boynton Beach, Florida 33436	SECRE	1005 JAN
Treasurer: Michael Kubica	MARY SSEE	6
Address: 7229 Chesapeake Circle, Boynton Beach, Florida 33436	OF ST	<u>#</u> 8
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or direction.	ATE	8: 37
(Signature of Director or Officer listed in number 12 of the application)		
14. Michael Kubica, Director, President		
(Typed or printed name and capacity of person signing amplication)		

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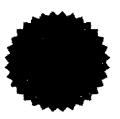
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HEALTHCARE ECONOMETRICS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF NOVEMBER, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HEALTHCARE ECONOMETRICS, INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF JANUARY, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

2005 JAN -6 AH 8: 37 SECRETARY OF STATE TALLAHASSEE, FLORIGA



Flarriet Smith Hindson

AUTHENTICATION: 3497936

DATE: 11-23-04

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