

FD6000002278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

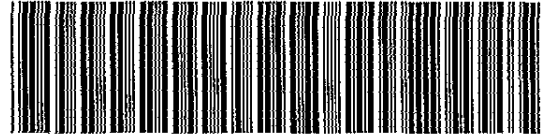
(Business Entity Name)

(Document Number)

Certified Copies' _____ Certificates of Status _____

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02/17/06--01034--006 **78.75

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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W06-8514

YMD 4/11



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2006

JEFFREY STROMFELD
400 OSER AVE.
SUITE 2050
HAUPPAUGE, NY 11788

SUBJECT: SCAN MODUL SYSTEM INC.
Ref. Number: W06000008514

We have received your document for SCAN MODUL SYSTEM INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Based upon information provided by the Florida Department of Revenue, pursuant to section 213.053(14), Florida Statutes, it appears that SCAN MODUL SYSTEM INC. has transacted business in Florida prior to submitting an "Application for Authority to Transact Business in Florida". The information received from the Florida Department of Revenue indicates, as the initial date of transacting business in the State of Florida.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$5,750.00.

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) 245-6972.

Doris Brown
Document Specialist

Letter Number: 606A00012311



400 Oser Ave, Suite 2050
Hauppauge, NY 11788
800-944-7459
www.scanmodul.com

Ms. Doris Brown
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Ref. Number: W06000008514

Dear Ms. Brown,

In reference to your letter dated February 21, 2006, I am in objection of your fees and penalties imposed due to the following.

Pursuant to section 607.1501(2f), Scan Modul System is a NY based company that solicits orders in the state of Florida, but they are required to be accepted outside your state before they become contracts. Therefore we do not meet the guidelines that constitute transacting business within the state of Florida.

If you should have any further questions with regard as to how our organization is structured, please feel free to contact me at the number provided above

Best Regards,
Scan Modul System, Inc.

A handwritten signature in cursive script that reads "Richard Hauth".

Richard Hauth
Managing Director

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06 APR -4 PM 2:06

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

**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. SCAN modul System 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. 22-3197938
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 4/24/1996 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. AUGUST 23, 2001
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 400 OSER AVE SUITE 2050 HAWTHORNE, NY 11788
(Principal office address)

SAME
(Current mailing address)

8. to sell Inventory MGT Systems to HOSPITALS
(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: Kyle Seilheimer

Office Address: 13761 BLUESTONE LAKE CT.

DAVIE, Florida 33325
(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.

Kyle Seilheimer
(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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

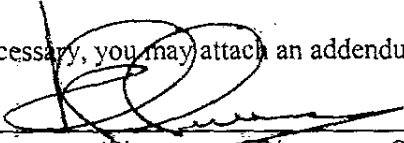
Chairman: KLAUS LARSSON
Address: RONNEVANGS ALLE # 8
DK-3400 Hillgrove Denmark
Vice Chairman: MARVIN GERBER
Address: 400 OSER AVE SUITE 2050
HAWTHORNE, NY 11788
Director: MANS LARSSON
Address: RONNEVANGS ALLE # 8
DK-3400 Hillgrove Denmark
Director: LARS CLAUSSEN
Address: RONNEVANGS ALLE # 8
DK-3400 Hillgrove Denmark

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B. OFFICERS

President: KLAUS LARSSON
Address: RONNEVANGS ALLE # 8
DK-3400 Hillgrove Denmark
Vice President: MARVIN GERBER
Address: 400 OSER AVE SUITE 2050
HAWTHORNE, NY 11788
Secretary: MANS LARSSON
Address: RONNEVANGS ALLE # 8 DK-3400 Denmark
Treasurer: LARS CLAUSSEN
Address: RONNEVANGS ALLE # 8 DK-3400 Hillgrove Denmark

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

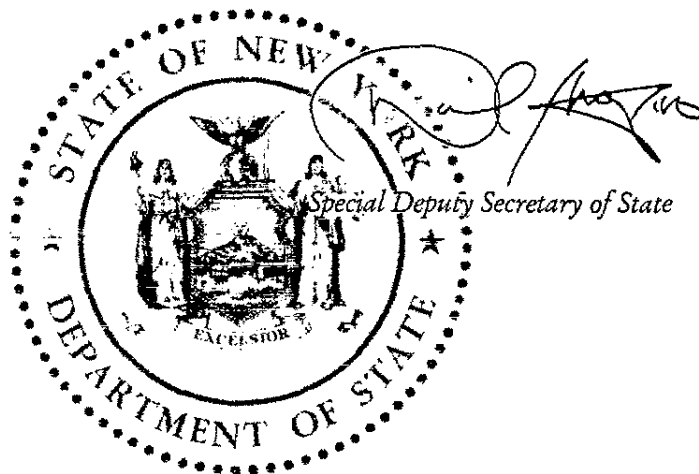
13. 
(Signature of Director or Officer listed in number 12 of the application)

14. KLAUS LARSSON - President
(Typed or printed name and capacity of person signing application)

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of SCAN MODUL SYSTEM, INC. was filed on 04/24/1996, 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 an existing corporation.

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 08th day of February two
thousand and six.*



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