

Division of Corporations

Florida Department of State
Division of Corporations
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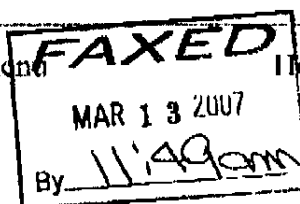
FOREIGN PROFIT/NONPROFIT CORPORATION

THREE WISHES, INC

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Florida Dept of State



March 14, 2007

FLORIDA DEPARTMENT OF STATE

FLORIDA FILING & SEARCH SERVICES

Division of Corporations

SUBJECT: IN HOME RX

REF: W07000012722

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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Loria Poole
Document Specialist
New Filing Section

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Letter Number: 207A00017959

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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. **THREE WISHES, INC.**

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

IN HOME RX, INC.

(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.

(FBI number, if applicable)

4. **12/19/2001**

(Date of incorporation)

5. **PERPETUAL**

(Duration: Year corp. will cease to exist or "perpetual")

6. **NOT APPLICABLE**

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

7. **3443 STATE ST. SANTA BARBARA, CA 93105**

(Principal office address)

3443 STATE ST. SANTA BARBARA, CA 93105

(Current mailing address)

8. **SUPPLY DURABLE MEDICAL EQUIPMENT.**

(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: **Capitol Corporate Services, Inc.**

Office Address: **153 Office Plaza Dr., Ste A**

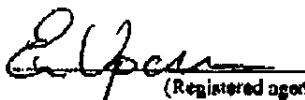
Tallahassee, Florida **32301**

(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.

 **asst. sec.**
(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: NOT APPLICABLE

Address: _____

Vice Chairman: NOT APPLICABLE

Address: _____

Director: NOT APPLICABLE

Address: _____

Director: NOT APPLICABLE

Address: _____

B. OFFICERS

President: BRIAN G. HAIMOVITZ

Address: 3443 STATE ST.
SANTA BARBARA, CA 93105

Vice President: BRIAN G. HAIMOVITZ

Address: 3443 STATE ST.
SANTA BARBARA, CA 93105

Secretary: BRIAN G. HAIMOVITZ

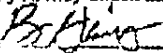
Address: 3443 STATE ST.

Treasurer: BRIAN G. HAIMOVITZ

Address: 3443 STATE ST.

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

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

14. BRIAN G. HAIMOVITZ, PRESIDENT

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

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SECRETARY OF STATE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDACERTIFICATE OF EXISTENCE
WITH STATUS IN GOOD STANDING

I, ROSS MILLER, 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, non-profit corporations, corporation sales, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts 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, **THREE WISHES, 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 October 11, 2000, 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 on March 9, 2007.


ROSS MILLER
Secretary of State

Electronic Certificate
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online at <http://secretaryofstate.biz/>

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