

FD9000000261

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

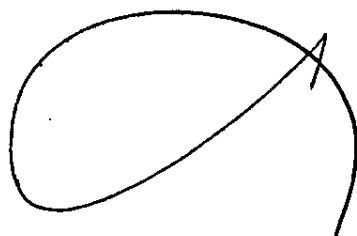
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

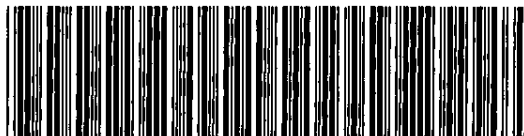
Special Instructions to Filing Officer:

209A - 2430

~~609 969~~

Office Use Only

 1/22



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01/07/09--01008--014 \*\*78.75

FILED

2009 JAN 21 AM 8:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** NeuroTech Systems, Inc. (Federal and New Jersey S-Corporation)  
(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:

Johnna L. Babiarz

(Name of Person)

NeuroTech Systems, Inc.

(Firm/Company)

1532 Kilrush Drive

(Address)

Ormond Beach, FL 32174

(City/State and Zip code)

For further information concerning this matter, please call:

Johnna L. Babiarz

(Name of Person)

at ( 908 ) 693-8841

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 9, 2009

JOHNNA L. BABIARZ  
NEUROTECH SYSTEMS, INC.  
1532 KILRUSH DRIVE  
ORMOND BEACH, FL 32174

SUBJECT: NEUROTECH SYSTEMS, INC.  
FLORIDA, INC.  
Ref. Number: W09000000969

NEUROTECH SYSTEMS OF

We have received your document for NEUROTECH SYSTEMS, INC. NEUROTECH SYSTEMS OF FLORIDA, 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):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is S69569 - NEUROTECH SYSTEMS, INC..

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6934.

Loria Poole  
Regulatory Specialist II

Letter Number: 709A00000746

RECEIVED  
DEPARTMENT OF STATE  
09 JAN 21 PM 2:58

*changed  
to  
NeuroTech  
Systems  
Southeast,  
INC.  
see corrected  
attachment  
line #1  
- see  
attachment  
from  
state of NJ*

January 15, 2009

Ms. Loria Poole  
Regulatory Specialist II  
Florida Department of State  
Division of Corporations  
Corporate Records  
PO Box 6327  
Tallahassee, FL 32314

RE: Ref. Number W09000000969  
NeuroTech Systems of Florida, Inc.

Dear Ms. Poole,

Enclosed please find the revision to the corporation name which I now submit as NeuroTech Systems Southeast, Inc., NOT NeuroTech Systems of Florida. My search of [www.sunbiz.org](http://www.sunbiz.org) indicates that this name is available for use.

Also enclosed per your request is a certificate of standing from the state of New Jersey. I called the office of the Secretary of State of New Jersey and they directed me to obtain this document, a certificate of standing, to submit to you.

If you have any questions please call me at 908-693-8841 (cell) or 386-236-8336 (home).

Cordially,



Johnna L. Babiarz  
1532 Kilrush Drive  
Ormond Beach, FL 32174

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. NeuroTech Systems, Inc.

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

NeuroTech Systems Southeast, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New Jersey

(State or country under the law of which it is incorporated)

3. 22-3401467

(FEI number, if applicable)

4. October 13, 1995

(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. 1532 Kilrush Drive, Ormond Beach, FL 32174

(Principal office address)

1532 Kilrush Drive, Ormond Beach, FL 32174

(Current mailing address)

8. Pharmaceutical/Healthcare consulting

(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: Johnna L. Babiarz

Office Address: 1532 Kilrush Drive

Ormond Beach

(City)

, Florida 32174

(Zip code)

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2009 JAN 21 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.*

Johnna L. Babiarz  
(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:

**A. DIRECTORS**

Chairman: Johnna L. Babiarz

Address: 1532 Kilrush Drive  
Ormond Beach, FL 32174

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

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

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

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

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

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

**B. OFFICERS**

President: Johnna L. Babiarz

Address: 1532 Kilrush Drive  
Ormond Beach, FL 32174

Vice President: \_\_\_\_\_

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

Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

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

**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. Johnna L. Babiarz

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

**STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING**

**NEUROTECH SYSTEMS, INC.**

0100642167

*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on October 13, 1995.*

*As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.*

*I further certify that the registered agent and registered office are:*

*Andrew Fizer Cpa  
175 Northfield Road  
Bridgewater, NJ 08807 3708*



Certification# 113443527

*IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed my  
Official Seal at Trenton, this  
15th day of January, 2009*

A handwritten signature in black ink, appearing to read "R. David Rousseau".

*R. David Rousseau  
State Treasurer*

Verify this certificate at  
[https://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)