

F13000003995

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

MRB
9/18/13

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: M.W. BIOMEDICAL, C.A. CORP.

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," or "Certificate of Good Standing" 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:

Isaac J. Mitrani

Name of Person

Mitrani, Rynor, Adamsky & Toland, P.A.

Firm/Company

301 Arthur Godfrey Road

Address

Miami Beach, Florida 33140

City/State and Zip code

imitrani@mitrani.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Isaac J. Mitrani

Name of Person

at (305) 358-0050

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

**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. **M.W. Biomedical, C.A. Corp.**

(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. **Venezuela**

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

3. _____

(FEI number, if applicable)

4. **April 26, 2005**

(Date of incorporation)

5. **Perpetual**

(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. **Avenida Universidad, Edificio Centro, Parque Carabobo, Piso 9, Apt. 902, Urbanizacion La Candelaria, Venezuela, Zona Postal 1010**

(Principal office address)

301 Arthur Godfrey Road, Penthouse, Miami Beach, Florida 33140

(Current mailing address)

8. Import/export of medical materials, products, equipment for biomedical and laboratory use, electronic products and spare parts and accessories, and any other lawful business activities.

(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:

Isaac J. Mitrani, Esq.

Office Address:

301 Arthur Godfrey Road, Penthouse

Miami Beach

(City)

, Florida

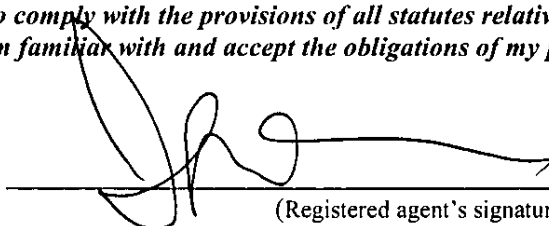
33140

(Zip code)

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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.



(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: Monica Cecilia Carvajal Blanco

Address: Av. Universidad, Edificio Centro Parque Carabobo, Piso 9, Apt. 902
Urbanizacion La Candelaria, Zona Postal 1010, Caracas, Venezuela

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: Monica Cecilia Carvajal Blanco

Address: Av. Universidad, Edificio Centro Parque Carabobo, Piso 9, Apt. 902
Urbanizacion La Candelaria, Zona Postal 1010, Caracas, Venezuela

Vice President: Juan Carlos Pisonero Gascon

Address: Av. Universidad, Edificio Centro Parque Carabobo, Piso 9, Apt. 902
Urbanizacion La Candelaria, Zona Postal 1010, Caracas, Venezuela

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

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Juan Carlos Pisonero Gascon

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

TRANSLATION OF FORM SIR RIF 07 – REGISTRY OF FISCAL INFORMATION

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FORM SIR RIF 07

Republic of Venezuela

REGISTRY OF FISCAL INFORMATION (RIF)

SENIAT

Integrated National Administration Services
for Customs and Taxation
Attached to the Ministry of Peoples Power for
Economy and Finance
RIF : G-20000303-0

Certificate of Incorporation
(RIF Number)

J-31322400-6

THIS CERTIFICATE IS HEREBY ISSUED
IN CONFORMITY WITH THE PROVISIONS OF
ARTICLE 9 OF PROVIDENCE NO. 0073
DATED 06/02/2006, PUBLISHED IN THE
OFFICIAL GAZETTE NO. 38.389 DATED 02/03/06

Last Names and Names – Name or Social Purpose
M. W. Biomedical, C.A. Corp.

City:
Caracas

Incorporation Date:
04/26/2005

Address:
Avenida Universidad
Edificio Centro Parque Carabobo
Piso 09, Apt. 902
Urbanizacion La Candelaria
Zona Postal 1010, Caracas, Venezuela

Regional Management:

Capital

Issuance
Date: 06/10/2013

Expiration Date:
006/10/2016

F-2012-07 No.4517874

3313224006-EPX
Authorized Signature

CERTIFICATE OF TRANSLATOR

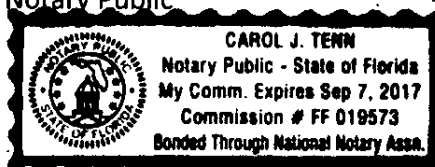
I hereby certify that I have translated the above Registry of Fiscal Information, the original of which in Spanish is attached hereto; I am fluent in the Spanish and English languages; the above translation is accurate, true and correct.

Bertha J. de la Torre
Bertha J. de la Torre

SWORN TO AND SUBSCRIBED before me on this 11TH day of September, 2013, by Bertha J. de la Torre, who is personally known to me.

Carol J. Tenn
Notary Public

My Commission expires:



FORMA SIR RIF 07
 REPUBLICA BOLIVARIANA DE VENEZUELA
SENIAT
 SERVICIO NACIONAL INTEGRADO DE ADMINISTRACION TRIBUTARIA
 Ministerio del Poder Popular de Planificación y Finanzas
 RIF: G.20000.001-0

REGISTRO DE INFORMACION FISCAL (RIF)
 CERTIFICADO DE INSCRIPCION (NUMERO DE RIF)
 J-31322400-6

APELLIDOS Y NOMBRES - NOMBRE O RAZON SOCIAL

M.N. BIOMEDICAL, C.A

DIRECCION:

AV UNIVERSIDAD EDIF CENTRO PARQUE
 CARABOBO PISO 09 APT 902 URB LA
 CANDELARIA
 ZONA POSTAL 1010

EXPEDICION GRATUITA

DE CONFORMIDAD CON LO PREVISTO EN LA LEY DE ASESORIA FISCAL Y DE LA RESOLUCION DE LA FISCALIA GENERAL DE LA ADMINISTRACION TRIBUTARIA N° 0073 DE FECHA 08/02/2006, PUBLICADA EN LA GACETA OFICIAL N° 68.389 DE FECHA 02/03/2006, SE EXPIDE EL PRESENTE CERTIFICADO.

CIUDAD:	FECHA DE INSCRIPCION:
CARACAS	26/04/2005
GERENCIA REGIONAL:	FECHA DE EXPEDICION:
CAPITAL	10/06/2013
	FECHA DE VENCIMIENTO:
	10/06/2016



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TALLAHASSEE FLORIDA