

F14axx00048

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

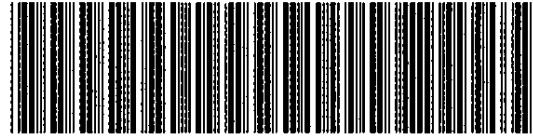
(Business Entity Name)

(Document Number)

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

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## COVER LETTER

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

**SUBJECT:** Bell Medical Services, Inc.

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:

Rita Flanagan

Name of Person

Bell Medical Services, Inc.

Firm/Company

120 Vanderburg Road

Address

Marlboro, NJ 07746

City/State and Zip code

rita@bellmed.com

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

For further information concerning this matter, please call:

Peter S. Martin, CPA at ( 609 ) 581-0300

Name of Person

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. Bell Medical Services, 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 Jersey

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

3. 22-3469485

(FEI number, if applicable)

4. 9/27/1996

(Date of incorporation)

5. perpetual

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

6. January 1, 2013

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

7. 120 Vanderburg Road, Marlboro, NJ 07746

(Principal office address)

120 Vanderburg Road, Marlboro, NJ 07746

(Current mailing address)

8. Sale of medical equipment and supplies

(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: Steven Greenberg

Office Address: 961 Iris Drive

Delray Beach

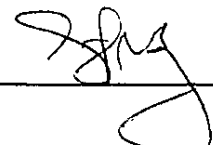
(City)

, Florida 33483

(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.*

x 

(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.

14 DEC 31 AM 11:29  
SECRETARY OF STATE  
FLORIDA

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

**A. DIRECTORS**

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

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

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

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

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

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

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

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

**B. OFFICERS**

President: Steven Greenberg

Address: 961 Iris Drive

Delray Beach, FL 33483

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

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

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

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

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

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

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

X 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.

X 14. Steve Greenberg

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

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
LONG FORM STANDING WITH CHARTER DOCUMENTS

BELL MEDICAL SERVICES, INC.  
0100680121

*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 September 27, 1996.*

*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:*

Steve Greenberg  
120 Vanderburg Rd  
Marlboro, NJ 07746

*I further certify that as of the date of this certificate, the following amendments and changes are on file in this office:*

Change Of Agent And Office	10/22/1996
Change Of Agent And Office	08/14/2000
Change Of Agent And Office	10/25/2001
Revoked For Failure To Pay Annual Reports	04/16/2007
Change Of Agent And Office	08/29/2007
Reinstatement Process Pending	08/29/2007
Reinstated (Annual Reports)	12/07/2007

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STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
LONG FORM STANDING WITH CHARTER DOCUMENTS

BELL MEDICAL SERVICES, INC.  
0100680121



Certificate Number: 130521482

Verify this certificate online at  
[http://www1.state.nj.us/FYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](http://www1.state.nj.us/FYTR_StandingCert/JSP/Verify_Cert.jsp)

IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed  
my Official Seal at Trenton, this  
13th day of December, 2013

Andrew P Sidamon-Eristoff  
State Treasurer