

F96000005829

TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section
Division of Corporations

P448 15916-21850
100001973501--7
-10/15/96--01031--005
*****70.00 *****70.00

SUBJECT: STARTER MEDICAL 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:

000002003120--3
-11/13/96--01131--005
*****200.00 *****200.00

CHRISTOPHER J. TWOHEY, ESQ.

(Name of Person)

BAUER & TWOHEY, P.A.

(Firm/Company)

312 DENVER AVENUE

(Address)

STUART, FLORIDA 34994

(City/State/Zip)

56 NOV - 7 PM 2:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Should you need to call someone concerning this matter, please call:

CHRISTOPHER J. TWOHEY
(Name of Person)

at (561) 221-8221
(Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Sec.
Division of Corporations
409 E. Gaines St
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

October 28, 1996

CHRISTOPHER J TWOHEY, ESQ.
BAUER & TWOHEY, P.A.
312 DENVER AVE
STAURT, FL 34994

SUBJECT: STARTER MEDICAL CORPORATION
Ref. Number: W96000021880

We have received your document for **STARTER MEDICAL CORPORATION** and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

Pursuant to section 607.1502(4) or 617.1502(4), F.S., this office is required to collect a penalty of \$1000 for each year this corporation transacted business in Florida prior to qualification and the appropriate annual report fees that would have been due had the corporation qualified the year it began operation in this state.

However, the \$1000 per year penalty fee is waived, pursuant to laws of Florida 96-212, for any corporation that applies for a certificate of authority between July 1, 1996 and December 1, 1996.

The total amount due this office through December 31, 1996 to cover the back annual report(s) is \$200.00.

If you have any questions concerning the filing of your document, please call (904) 487-6094.

Doug Dickinson
Document Specialist

Letter Number: 996A00049557



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

October 15, 1996

CHRISTOPHER J TWOHEY, ESQ.
BAUER & TWOHEY, P.A.
312 DENVER AVE
STAURT, FL 34994

SUBJECT: STARTER MEDICAL CORPORATION
Ref. Number: W96000021880

We have received your document for STARTER MEDICAL CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Pursuant to section 607.1502(4) or 617.1502(4), F.S., this office is required to collect a penalty of \$1000 for each year this corporation transacted business in Florida prior to qualification and the appropriate annual report fees that would have been due had the corporation qualified the year it began operation in this state.

However, the \$1000 per year penalty fee is waived, pursuant to laws of Florida 96-212, for any corporation that applies for a certificate of authority between July 1, 1996 and December 1, 1996.

The total amount due this office through December 31, 1996 to cover the back annual report(s) is \$200.00.--

If you have any questions concerning the filing of your document, please call (904) 487-6094.

Doug Dickinson
Document Specialist

Letter Number: 796A00047239

*OK per S
PZ New*

**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. STARTER MEDICAL CORPORATION

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. DELEWARE

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

3. 04-323-7251

(FEI number, if applicable)

4. May 27, 1994

(Date of Incorporation)

5. PERPETUAL

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

6. APRIL 1, 1995

(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155.

7. 141 WASHINGTON STREET

EAST WALPOLE, MASSACHUSETTS

(Current mailing address)

8. MEDICAL SERVICES

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: CHRISTOPHER J. TWOHEY, ESQ.

Office Address: 312 DENVER AVENUE

STUART

, Florida, 34994

(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.


(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors: (Street address **ONLY**- P. O. Box **NOT** acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Robert F. Carlson, Jr.

Address: 141 Washington Street, E. Walpole, MA 02032

Director: _____

Address: _____

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: John Kuchta

Address: 141 Washington Street, E. Walpole, MA 02032

Vice President: _____

Address: _____


Secretary/Treasurer: Jerry M. Stringham

Address: 141 Washington Street, E. Walpole, MA 02032

Treasurer: _____

Address: _____

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

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Jerry M. Stringham, Secretary/Treasurer
(Typed or printed name and capacity of person signing application)

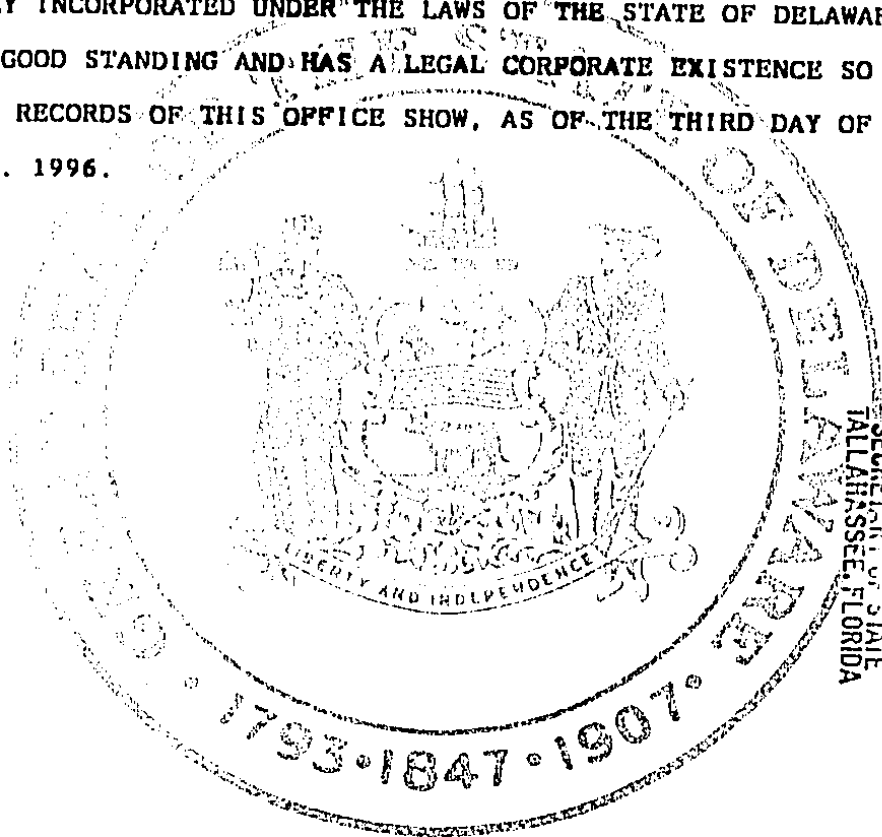
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

State of Delaware
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STARTER MEDICAL CORPORATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF OCTOBER, A.D. 1996.



SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED



Edward J. Freel

Edward J. Freel, Secretary of State

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960282919

AUTHENTICATION:

DATE:

8131426

10-03-96