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TO: QUALIFICATION/TAX LIEN SECTION DIVISION OF CORPORATIONS

200002036342--E

SUBJECT:	The Doctor Directory, Inc.
	(Name of compresson - 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 raturn all correspondence concerning this matter to the following:

DAUID K. BARKER

(Name of Person)

The Doctor Directory Inc.

(Firm/Company)

4691 N. University Dr. Suite No. 327

(Address)

CORAL Springs FL 33067

(City, State and Zip Code)

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

DAVID K. BARKEL at (305) 265 - 2630 .

(Name of Person) 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 Sec. Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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:

(Date of Incorporation	awof which it is income of 1996 5.	CORPORATED COMPONENT COMPO	5 - 069°	6327 ble)	 .
DAN 1 1997 (Data first transacted busine 4691 N. U CORAL Spr	in Florida. (See section DR	tions 807.1801, 807.1802 The Suite 3	and 817.196, F.S.)	SECRETA TALLAHAS	95 DEC 2
Interpret Publi	(Current mailing add)	ress)	Torre	SEE, FLO	23 AH 8:β3
Name and street add	DAVID K.	registered agen BARKER	t:	A	
Office Address: _	4691 N. U. CORAL SP	luiveas. L. DR. Prings	Suite 327	33067 (Zip Code)	
Registered agent's ving been named as reportion at the place istered agent and agreal statutes relative to the and accept the obligation.	egistered agent an designated in this e to act in this ca the proper and co	pacity. I turther t	nereby accept t ngree to comply	ne appointme	nt as

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.

(Registered agent's signature)

A. DIRECT	and addresses of officers and/or s ONLY- P. O. Box NOT acceptable) ORS (Street address only- P. O. Bo	
Chairman:	BOBERT A. BARKER M.D.	_
rudress:	- LALVIROLINA ROLL	
	1. 1001Reat, 10, C. 28757	_
'ice Chairman	1:	
ddrees:		
	DAVID K. BARKER	
ddress:		
	Miscopite FL 33063	——————————————————————————————————————
irector:	MARK Busond	
ddress:	125 Leslie Loch Lyne	N 9
	Columbia S.C. 29212	
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The State of South Carolina



Office of Secretary of State Jim Miles Certificate of Existence

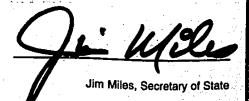
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I, Jim Miles, Secretary of State of South Carolina Hereby certify that:

DOCTOR DIRECTORY, INC. THE,

a corporation duly organized under the laws of the State of South Carolina on September 16th, 1996, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to Section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State at Columbia this 10th day of December, 1996.



Note: This certificate does not contain any representation concerning fees or taxes owed by the Corporation to the South Caroline Tax Commission or whether the Corporation has field the annual report with the Tax Commission. If it is important to know whether the Corporation has paid all taxes due to the State of South Carolina, and has field annual reports, a certificate of compliance must be obtained from the Tax Commission.