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TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: GULF COAST CLINICAL 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", 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:

James V. Roberts, Jr., Esq.
(Name of Person)
McCleave, Roberts, Shields & Green, P.C.
(Firm/Company)
Post Office Box 2353
(Address)
Mobile, Alabama 36652-2353
(City/State/Zip)

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

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James V. Roberts, Jr. at (334) 432-1656
(Name of Person) (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Section
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

McCleave, Roberts, Shields & Green, P.C.

ATTORNEYS AT LAW

SUITE 1104 AMSOUTH CENTER
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63 SOUTH ROYAL STREET
MOBILE, ALABAMA 36602-3233

DANIEL L. MCCLEAVE*
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**ALSO ADMITTED IN MISSISSIPPI & TEXAS

TELEPHONE (334) 432-1656
FACSIMILE (334) 432-3357

October 31, 1997

Florida Secretary of State
Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

BY FEDERAL EXPRESS

Re: Qualification to do business by
Gulf Coast Clinical Services, Inc.
Our File No.: 96-7474-R-R

Dear Sir or Madam:

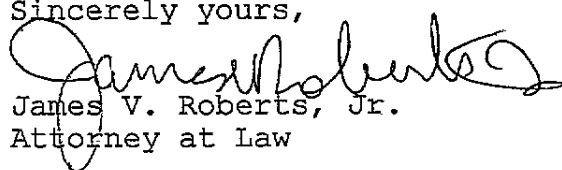
This firm represents Gulf Coast Clinical Services, Inc., which desires to qualify to do business in the State of Florida. The registered agent for service will be CT Corporation System. To that end, enclosed please find the following:

1. Original Transmittal Letter;
2. Original Application by Foreign Corporation;
3. Certificate of Existence issued by the State of Alabama Secretary of State;
4. Certificate of Good Standing issued by the State of Alabama Department of Revenue; and
5. This firm's check in the amount of \$70.00 in payment of the application fee.

Please process this and take the necessary steps to have Gulf Coast Clinical Services, Inc. qualified to do business in the State of Florida. Please issue a letter of acknowledgment upon registration.

If you have any questions, please don't hesitate to call.

Sincerely yours,


James V. Roberts, Jr.
Attorney at Law

Enclosures

**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. GULF COAST CLINICAL SERVICES, INCORPORATED
(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. Alabama 3. 63-1175-827
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. July 11, 1996 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 253 St. Anthony Street
Mobile, Alabama 36603
(Current mailing address)
8. To conduct Phase I-IV Clinical research trial of new medications and devices in accordance
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) with all Federal, State and local laws, and other purposes allowed by law.
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
- Name: CT Corporation System
- Office Address: 1200 South Pine Island Road
Plantation, Florida, 33324
(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.

Dale W. Morris

(Registered agent's signature)

Dale W. Morris, Assistant Vice President

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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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: Lori A. Nesbitt

Address: 253 St. Anthony Street Mobile, AL 36603

Vice Chairman: Suzanne Collins

Address: 253 St. Anthony Street, Mobile, AL 36603

Director: Lori A. Nesbitt

Address: 253 St. Anthony Street
Mobile, AL 36603

Director: Suzanne Collins

Address: 253 St. Anthony Street
Mobile, AL 36603

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

President: Lori A. Nesbitt

Address: 253 St. Anthony Street
Mobile, AL 36603

Vice President: Suzanne Collins

Address: 253 St. Anthony Street
Mobile, AL 36603

Secretary: Suzanne Collins

Address: 253 St. Anthony Street
Mobile, AL 36603

Treasurer: Suzanne Collins

Address: 253 St. Anthony Street
Mobile, AL 36603

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

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

14. Lori A. Nesbitt President
(Typed or printed name and capacity of person signing application)

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STATE OF ALABAMA

I, Jim Bennett, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that the domestic corporation records on file in this office disclose that Gulf Coast Clinical Services, Inc. incorporated in Mobile County, Mobile, Alabama on July 18, 1996. I further certify that the records do not disclose that said Gulf Coast Clinical Services, Inc. has been dissolved.

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In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

August 5, 1997

Date

Jim Bennett

Jim Bennett

Secretary of State