ashkuhn Ltd.

DONNA M. JAEGLE, LEGAL ASSISTANT

April 17, 1998

700002493797---4 -04/20/98 --01074 --006 ***1220.00 ***1220.00

Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Ladies and Gentlemen:

I submit a duplicate original Application by Foreign Corporation for Authorization to Transact Business in Florida with respect to Health Advance Institute, Inc., along with a Certificate of Good Standing and a check in the amount of \$1,220 to cover your filing and penalty fees. Please immediately process the Application and return evidence of such filing to me via the enclosed, self-addressed, stamped envelope.

Thank you for your assistance. If you have any questions, please call.

SUTKOWSKI & WASHKUHN LTD.

G:\15\11954.000\FL SOS qualification.wpd Enclosures:

Application by Foreign Corporation (duplicate original) Certificate of Good Standing (original)

\$1,220 Check Return Envelope

John Pellettiere, President cc: Health Advance Institute, Inc. 211 Waukegan Road, Suite 330 Chicago, Illinois 60093 (without Enclosures)

dy4/21/9

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.	Health Advance Institute, Inc.	,	
	(Name of corporation: must include the word "INCORPORA words or abbreviations of like import in language as will cle natural person or partnership if not so contained in the name	Parly indicate that it is a composition instead of	
2.	Delaware	336-4170906	
	(State or country under the law of which it is incorporated)	(FEI number, if applicable)	_
4.	July 21, 1997 (Date of Incorporation)	5. Perpetual (Duration: Year corp. will cease to exist or	
		"perpetual")	
6.	July 21, 1997	<u> </u>	
υ.	(Date first transacted business in Florida. (SEE SECTIONS	s 607.1501, 607.1502, AND 817.155, F.S.)	_
7. ,	211 Waukegan Road, Suite 330		
	Chicago Northfield, IL 60093		-
,	(Current mailing	address)	-
		•	
8	Clinical trials	<u> </u>	
	(Purpose(s) of corporation authorized in home state or cou	intry to be carried out in the state of Florida)	_
9.	Name and street address of Florida registered as acceptable)	A:SE -98	
	Name: Corporation Service Compa		11
	Office Address: 1201 Hays Street	ASSEE.	
	Tallahassee	\mathcal{L} , Florida, $323010\frac{S}{10}$	J
10.	Registered agent's acceptance:	(Zip Coept co	
Hæ	ving heen named as registered agent and to age	cant parties of process for the street	

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.

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

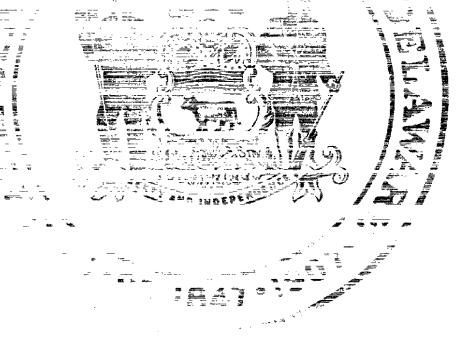
Director Chaman :	Edward F. Sutkowski	
Address: _	124 Southwest Adams, Suite 560	
	Peoria, IL 61602	45 8
Director MacChai r	MAN:James L. Currie	Eg 5
	190 South LaSalle, Suite 2800	APR CO
_	Chicago, IL 60603	E.C.
	A. Dana Callow	755
Address: _	30 Rowesworth	A STATE
_	Boston, MA 02110	
Director: _	Douglas R. Oberhelman	
Address: _	100 Northeast Adams Street	
_	Peoria, IL 61629-5390	,
B. OFFIC	ERS (Street address only- P. O. Box NOT acceptable)	
President:	John Pellettiere	
Address: _	211 Waukegan Road, Suite 330	
	Chicago, II, 60093	
Vice Preside	ent: none	
Address: _		
Secretary: _	Edward F. Sutkowski	······································
Address: _	124 Southwest Adams, Suite 560	
_	Peoria, IL 61602	
Freasurer:	Randi Binstock	
Address: _	211 Waukegan Road, Suite 330	
	Chicago, IL 60093	
NOTE: If a	negessary, you may attach an addendum to the application list of directors.	•
	ature of Chairman Vice Chairman or any officer listed in surebuilt a	£'
	ature of Chairman, Vice Chairman, or any officer listed in number 12 of F. Sutkowski, Secretary	f the application

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

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HEALTH ADVANCE INSTITUTE, INC." 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 FIRST DAY OF APRIL, A.D. 1998.





Edward J. Freel, Secretary of State

AUTHENTICATION:

9004744

DATE:

04-01-98

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