F980000004870

To: Qualification Division of 0	n/Tax Lien Section Corporations			
SUBJECT:	C G ENTERPRISES	INC.		
(Name of corporation - must include suffix)				
Dear Sir or Madam: The enclosed "Appli" Certificate of Exist transact business in	cation by Foreign Corporate cace", and check are submit	ion for Authorization to Trac tied to register the above refe	1000262 -08/27/98 *****70, j psact Business in Florid	00 *****70.00 a,
Please return all correspondence concerning this matter to the following: 10002			10000262 -08/27/98- ******8.7	63417 01028003 % ******8.75
		Jame of Person)		
T C G ENTERPRISES INC.				
	1)	Firm/Company)		
7865 CAMINO REAL SUIZE 1-202				
(Address)				
MIAMI FLORIDA 33143				98
(City/State/Zip)				
Should you need to call someone concerning this matter, please call:				SECRETARY OF STAINS OF STA
MAGALY E R	IVAS-BRITO at (305) 595-4523		9. 1
(Name of Person)		(Area Code & Daytime Te	lephone Number)	- ONS
COURIER ADDRI	ess:	MAILING ADDR	ÆSS:	entu
		5 Va -: = 3	e e e e e e e e e e e e e e e e e e e	Sh-
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St.		Qualification/Tax l Division of Corpor P.O. Box 6327		0/28
Tallahassee, FL 32399		Tallahassee, FL 32	2314	

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. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or T C G ENTERPRISES INC. 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.) NEW YORK

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

3. 13-3346899

(FEI number, if applicable) PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual") MAY 1986 (Date of incorporation) N / A START UP (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 7865 CAMINO REAL SUIZE L-202 MIAMI FLORIDA 33143 (Current mailing address) distributor, MEDICAL 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 or Mail Drop Box NOT acceptable) Name: MAGALY E RIVAS-BRITO 7865 CAMINO REAL SUIZE L-202 Office Address: MIAMI 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.

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.

 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) TIRSO C. GAUTREAU Chairman: 200 E 33 ST SUIZE 18-C NEW YORK 10016 Address: Vice Chairman: Director: Address: __ Director: Address: __ B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: MAGALY E. RIVAS-BRITO Address: 7865 CAMINO REAL SUIZE L-202 MIAMI FLORIDA 33143 Vice President: Secretary: Address: Treasurer ROSE M. GAGNON Address: 200 E 33 ST SUIZE 18-C NEW YORK N.Y 10016 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

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

State of New York Department of State

I hereby certify, that the certificate of incorporation of T.C.G. ENTERPRISES, INC. was filed on 05/22/1986, with perpetual duration, and that a diligent examination has been made of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 06th day of August one thousand nine hundred and ninety-eight.

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Special Deputy Secretary of State

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