

F98000005039

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: LFP MEDICAL INTERNATIONAL, INCORPORATED
(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:

100002628071-8
-08/28/98-01091-001
*****70.00 *****70.00

PENNY SHNIER
(Name of Person)

LFP MEDICAL INTERNATIONAL, INC
(Firm/Company)

6103 Johns Road
(Address)

Tampa, FL 33634-4481
(City/State/Zip)

W98-19870

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

PENNY SHNIER at (813) 889-9808
(Name of Person) (Area Code & Daytime Telephone Number)

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DIVISION OF CORPORATIONS
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STREET 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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

August 31, 1998

PENNY SHNIER
LFP MEDICAL INTERNATIONAL, INC.
6103 JOHNS RD.
TAMPA, FL 33634-4481

SUBJECT: LFP MEDICAL INTERNATIONAL, INC.
Ref. Number: W98000019870

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We have received your document for LFP MEDICAL INTERNATIONAL, INC. 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 document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6095.

Jennifer Sindt
Document Examiner

Letter Number: 098A00044776

**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. LFP MEDICAL INTERNATIONAL, INC.
(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. NEVADA
(State or country under the law of which it is incorporated)
3. APPLIED FOR
(FEI number, if applicable)
4. JULY 15th, 1998
(Date of incorporation)
5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual")
6. JULY 15th, 1998
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. LFP MEDICAL INT'L, INC.
6103 Johns' Road, Suite 1, Tampa, FL 33634-4481
(Current mailing address)
8. SELLING of Medical Equipment
(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: GUY LEPINE
Office Address: 6103 Johns Road, Ste 1,
TAMPA, FL, Florida, 33634-4481
(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.

Guy Lepine
(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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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: WAYNE PIRTLE

Address: 5646 S. MOJAVE ROAD
LAS VEGAS, NEVADA 89120

Vice Chairman: RON FISHER

Address: 27092 BANBURY DR.
VALLEY CENTER, CA 92082

Director: GUY LEPINE

Address: 7407 BONAVENTURE DR.
TAMPA FL 33607

Director: BRIAN McMichael

Address: 221 W. CREST ST. Suite #200
ESCONDIDO, CA 92025

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

President: GUY LEPINE

Address: 7407 BONAVENTURE DR.
TAMPA, FL 33607

Vice President: WAYNE PIRTLE

Address: 5646 S. MOJAVE ROAD
LAS VEGAS, NEVADA 89120

Secretary: Brian McMichael

Address: 221 W. CREST ST. Suite 200
ESCONDIDO, CA 92025

Treasurer: RON FISHER

Address: 27092 BANBURY DR.
VALLEY CENTER, CA 92082

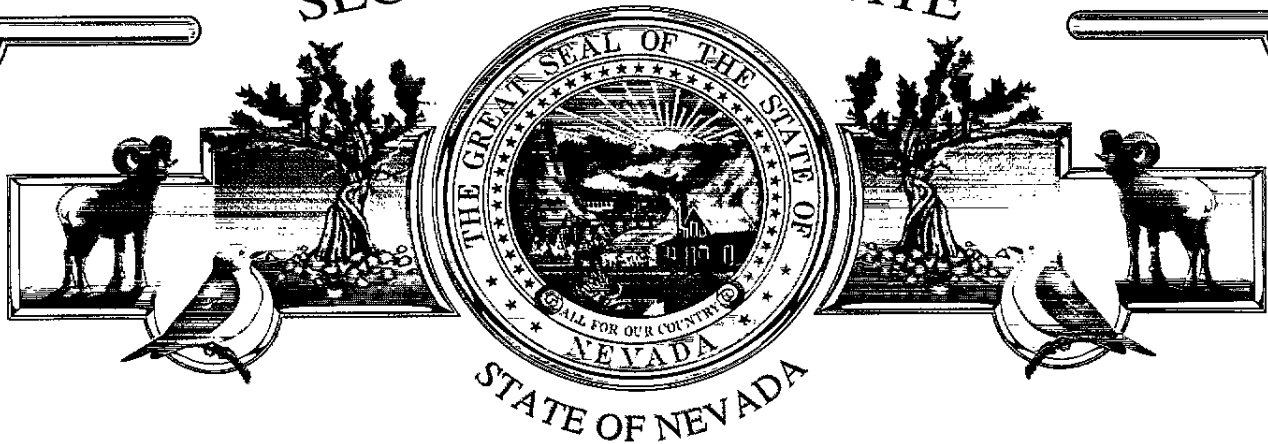
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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

14. GUY LEPINE
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **LFP MEDICAL INTERNATIONAL, INC.** as a Corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since July 10, 1998, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand
and affixed the Great Seal of State, at my office, in
Las Vegas, Nevada, on August 24, 1998.



Dean Heller
Secretary of State
By *Shaylene Davis*
Certification Clerk

SECRETARY OF STATE
DIVISION OF CORPORATIONS
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