To: n of Corporations

SUBJECT: GENERAL MEDICAL APPLICATIONS, INC

(Name of corporation - must include suffix)

Dear Sir or Madam:

800002673535 *****70.00 *****70.00

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:

(Name of Person)

(Firm/Company)

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

(Name of Person) at (949) 8880586. (Area Code & Daytime Telephone Number

MAILING ADDRESS:

Qualification/Tax Lien Section **Division of Corporations** 409 E. Gaines St. Tallahassee, FL 32399

STREET 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

October 28, 1998

GABRIELLA GABOR GENERAL MEDICAL APPLICATIONS, INC. 2000 E. 4TH STREET SUITE 220 SANTA ANA, CA 92705

SUBJECT: GENERAL MEDICAL APPLICATIONS, INC.

Ref. Number: W98000024433

We have received your document for GENERAL MEDICAL APPLICATIONS, 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 designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 487-6958.

Letter Number: 298A00052874

Lee Rivers Document Specialist

ÀPPLICATION 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.	(TENERAL MEDICAL APPLICATIONS, 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.)	
	DELANARE 3. 33-0768081	
	(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4.	AUGUST 18 1997 5. PERPETUAL	
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6.	HAVE NOT TRANSACTED YET	-,
	(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
7.	2000 E, 4TH STREET SUTE 220	_2;-
	SANTA AND , CA 972705	
	(Current mailing address)	-
	TO THE TAX	
8.	SOLE OF MEDICAL SOFTWARE AND HARDWARE	
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	•
	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT accented a	ł
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable))
	Name: THE CONFORMION SERVICE COMPANY	-
വ	ffice Address: 1201 HAYS STORES	
٠.		
	TALLAHASSEE Florida, 3230	
	TALLAHASSEE , Florida, 3230 (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.

Mary J. Flowles
(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.

,	CTORS (Street address only - P.O. Box NOT acceptable)	
	JOSE D. RUBINSTAIN	-
.ddress: _	3 LA SORDINA, RANCHO SANTA MARGARITA,	CA 92688
– ice Chair	man:	
ddress: _		
irector: _	ABE LALADE	
ddress: _	4419 E. WICKHAM AV.	-
_	ORANGE, CA. 92867	-
irector: _	MYRON FALCHUK	
	110 FRANCIS STREET. SUTTE BE	and we have a second
_	BOSTON, MA 02215	
OFFIC	CERS (Street address only - P.O. Box NOT acceptable)	
esident:	JOSE D. RUBINSZANO	
ldress: _	3 LA SOROWA	· · ·
	RANCHO SANTA MARCHARITA, CA 92688	98 N SEE
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ldress:		SSE RY
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ldress:	3 LA SOROMA	
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easurer:	GABRIELLA GABOR	. 5
	ALIOSOE AL S	
_	LAWCHO SANTA MARCHARITA CA 92688.	
– OTE: If	necessary, you may attach an addendum to the application listing additional officers and/or direction	ectors.
	necessary, you may attach an addendum to the application listing additional officers and/or direction listension listing additional officers and listing additional off	

State.of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GENERAL MEDICAL APPLICATIONS, 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 NINETEENTH DAY OF OCTOBER, A.D. 1998.





AUTHENTICATION:

9361093

981402583

2786412

8300

10-19-98 DATE: