

F99000004735

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: BLANSETT PHARMACAL CO., 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:

LANELL STERLING, CPA

(Name of Person)

BELL & CO., P.A.

(Firm/Company)

4508 BURROW DRIVE

(Address)

NORTH LITTLE ROCK, AR 72116

(City/State/Zip)

700002840017--7

-09/13/99--01146--001

***1150.00 ***1150.00

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

700002840017--7

-04/15/99--01062--001

*****70.00 *****70.00

LANELL STERLING, CPA

(Name of Person)

at (501)753-9700

(Area Code & Daytime Telephone Number)

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

W99-9127
Pg. 701

Enclosed is a check for the following amount:

☒ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 SEP 13 PM 1:45



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

April 16, 1999

LANELL STERLING, CPA
BELL & CO., P.A.
4508 BURROW DRIVE
NORTH LITTLE ROCK, AR 72116

SUBJECT: BLANSETT PHARMACAL CO., INC.
Ref. Number: W99000009127

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We have received your document for BLANSETT PHARMACAL CO., 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.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$1150.00.

Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a sworn affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501 or 617.1501, Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 487-6094.

Agnes Lunt
Document Specialist

Letter Number: 399A00019618

**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. BLANSETT PHARMACAL CO., 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. ARKANSAS

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

3. 71-0564067

(FEI number, if applicable)

4. 12/17/81

(Date of incorporation)

5. 17⁺ years

(Duration: Year corp. will cease to exist or "perpetual")

6. 6/30/98

(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 14 PARKSTONE PLACE

NORTH LITTLE ROCK, AR 72116

(Current mailing address)

8. WHOLESALE DRUG SALES

(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: Daniel Novak

Office Address: 969 Main Street

Atlantic Beach

, Florida, 32233

(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.

X Daniel Novak

(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)

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A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: Larry A. Blansett

Address: 205 Spring River Road

N Little Rock, AR 72116

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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

President: LARRY BLANSETT

Address: 14 PARKSTONE PLACE

NORTH LITTLE ROCK, AR 72116

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

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

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

Corporations Name:

Blansett Pharmacal Co., Inc
14 Parkstone Circle
N. Little Rock, AR 72116

President:

Larry A. Blansett
205 Spring River Road
N. Little Rock, AR 72116

Secretary:

John Thurman
124 West Capitol Ste 1650
Little Rock, AR 72201

Director:

Joe Park Jr.
173 Castle Heights
Cabot, AR 72023

Director:

Larry A. Blansett
205 Spring River Road
N Little Rock, AR 72116

Director:

John Thurman
124 West Capitol Ste 1650
Little Rock, AR 72201

Director:

Dr. Glenn Knotts
6411 Fannin
Houston, TX 77030

Director:

Mike Ford
513 Dr. Gorman Drive
Belle Chasse, LA 70037

Director:

Dennis Milam
7 Silver Ridge Cove
N. Little Rock, AR 72118

Director:

Alta Jean Hall
14 Reservior Heights Road
Little Rock, AR 72207

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Sharon Priest
SECRETARY OF STATE

State of Arkansas SECRETARY OF STATE

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C E R T I F I C A T E

OF EXISTENCE

I, Sharon Priest, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show:

BLANSETT PHARMACAL COMPANY, INC.

a corporation chartered under the laws of the State of Arkansas, filed Articles of Incorporation in this office December 29, 1981.

Our records reflect this corporation has paid all fees, taxes and penalties owed to this State, as required to be collected by this office, and has delivered its most current annual corporate franchise tax report to this office.

I certify this corporation has not filed articles of dissolution with this office.

IN TESTIMONY WHEREOF, I have hereunto
set my hand and Official Seal on this, the
10th day of March, 1999.

Sharon Priest

Sharon Priest
Secretary of State

By: *David Morrow*
David Morrow

C-3/Rev 10-1-88