

P970000032287

FILED
97 APR -9 PM 3:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/03/97

FLORIDA DIVISION OF CORPORATIONS
PUBLIC ACCESS SYSTEM
ELECTRONIC FILING COVER SHEET

3:45 PM

((H97000003532 1))

TO: DIVISION OF CORPORATIONS

FAX #: (904)922-4001

FROM: ACE INDUSTRIES, INC.
CONTACT: PAM FRIEDMAN
PHONE: (305)358-2571

ACCT#: 070744001530

FAX #: (305)358-7832

NAME: THE MEDICAL PRACTITIONER DATABANK, INC.
AUDIT NUMBER.....H97000003532
DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.
CERT. OF STATUS..0
CERT. COPIES.....1

PAGES..... 1
DEL.METHOD.. FAX
EST.CHARGE.. \$122.50

NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX
AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

** ENTER 'M' FOR MENU. **

ENTER SELECTION AND <CR>:
Menu: <Ctrl R-Shift>

2400 7E1

VT100

Online

nc 4/9/97



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

April 3, 1997

ACE INDUSTRIES

SUBJECT: THE MEDICAL PRACTITIONER DATABANK, INC.
REF: W97000007834

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Written approval and clearance of the terms BANK, BANKER, BANC, BANKING, TRUST COMPANY, BANCSHARES, SAVINGS & LOAN ASSOCIATION, SAVINGS BANK, or CREDIT UNION must be obtained from the Division of Banking and Finance, pursuant to section 655.922(2a), Florida Statutes. The address is:

Division of Banking
Director's Office
Suite 1401, The Capitol
Tallahassee, FL 32399-0350
(904) 488-1111.

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 (904) 487-6923.

Doris McDuffie
Corporate Specialist Supervisor

FAX Aud. #: H97000005532
Letter Number: 997A00016938

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314



ROBERT F. MILLIGAN
COMPTROLLER OF FLORIDA

OFFICE OF COMPTROLLER
DEPARTMENT OF BANKING AND FINANCE
STATE OF FLORIDA
TALLAHASSEE
32399-0350

April 7, 1997

Mr. Phillip J. Pastore
Network Administrator
The American Medical
Alumni Network
4691 N. University Dr. (334)
Coral Springs, FL 33067-4620

Dear Mr. Pastore:

Re: "The Medical Practitioner Databank, Inc."

Thank you for your recent letter/fax requesting approval for use of the above-referenced name. It is the opinion of this Department that your name is definitive enough to differentiate the business being conducted from that of a commercial bank or trust company. Therefore, the Department does not object to your use of the above-referenced name being registered to conduct business in the State of Florida.

Sincerely,

A handwritten signature in black ink, appearing to read "Wm. Douglas Johnson".

Wm. Douglas Johnson
Assistant Director
Division of Banking
101 East Gaines Street
The Fletcher Building - Sixth Floor
Tallahassee, FL 32399-0350
(804) 488-1111

:kr

cc: Karon Beyer, Chief
Bureau of Corporate Records
Division of Corporations
Secretary of State's Office

H97-5532

ARTICLES OF INCORPORATION

Article 1: Name of Corporation THE MEDICAL PRACTITIONER DATABANK, INC.
Address of Corporation 4691 NORTH UNIVERSITY DRIVE Suite 334
CORAL SPRINGS, FLORIDA 33067-4620

Article 2: CAPITAL STOCK: The number of shares which the corporation has authorized to be outstanding at any one time is 7,000, with a par value of \$0.01. (PAR VALUE is NOT REQUIRED).

Article 3: REGISTERED OFFICE: PHILIP J. PASTORE
and 4164 NORTHWEST 90th AVE. #205
REGISTERED AGENT: CORAL SPRINGS, FLORIDA 33065

I am familiar with and hereby accept the duties and responsibilities as registered agent for said corporation

Philip J. Pastore 4/2/97
Signature of Registered Agent Date

Article 4: The Board of Directors are: (Board of Directors is NOT REQUIRED)
First listed is President. Second is Secretary/Additional Directors.

1. PHILIP J. PASTORE
4164 NORTHWEST 90th AVENUE #205
CORAL SPRINGS, FLORIDA 33065-1752

Article 5: The Name and Address of the INCORPORATOR is:

PHILIP J. PASTORE
4164 NORTHWEST 90th AVENUE #205
CORAL SPRINGS, FLORIDA 33065-1752

In witness whereof I have subscribed my name

Philip J. Pastore
Signature of Incorporator 4-2-97
PHILIP J. PASTORE

H97-5532

Prepared by:

ace INDUSTRIES, INC.
54 NW 11th Street
Miami, FL 33136
305-358-2571

FILED
97 APR -9 PM 3:4
SECRETARY OF STATE
TALLAHASSEE, FLORIDA