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CORPORATION NAME(S) & I. 1. HC PEHABLE (Corporation Name)	DOCUMENT NUMBER(S) (if known): LITATION CORP- (Document #)	
2. (Corporation Name)	(Document #)	
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NEW FILINGS	AMENDMENTS	
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NonProfit	Resignation of R.A., Officer/Director	
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Other	Merger	
OTHER FILINGS	REGISTRATION/ QUALIFICATION	
Annual Report	Foreign	
Fictitious Name	Limited Partnership	
Name Reservation	Reinstatement	
	Trademark	

Other

CR2E031(9/92)

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 1, 2003

LAZARUS

SUBJECT: HC REHABILITATION CORP

Ref. Number: W03000021775

We have received your document for HC REHABILITATION CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

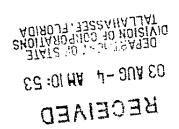
A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the original and one copy of 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) 245-6931.

Becky McKnight Document Specialist New Filings Section

Letter Number: 903A00044460





ARTICLE OF INCORPORATION

THE UNDERSIGNED INCORPORATOR(S), FOR FORMING A CORPORATION ACT, HEREBY ADOPT(S) THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I- NAME

• THE NAME OF THE CORPORATION SHALL BE:: HC REHABILITATION CO. P. P.

ARTICLE II –PRINCIPAL OFFICE

• THE PRINCIPAL PLACE OF BUSINESS AND MAILING OF THIS CORPORATION SHALL BE:

3509 SW 87 PL MIAMI, FL 33165

ARTICLE III -SHARES

• THE NUMBER OF SHARES OF STOCKS THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

100 SHARES

ARTICLE IV-INITIAL REGISTERED AGENT AND STREET ADDRESS

• THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS:

NAME: HAYMEE M. MORENO

ADDRESS: 1819 SW 107 AVE APT 1902 MIAMI, FL 33165



ARTICLE V -INCORPORATOR
THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF
INCORPORATION IS:
NAME: HAYMEE M. MORENO
STREET: 3509 SW 87 PL MIAMI, FL 33165
CITY/STATE/ZIP CODE: MIAMI, FL 33/65
THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES OF
INCORPORATION THIS 15 DAY OF AUGUST YEAR 2003 SIGNATURE
ARTICLE VI -DIRECTOR(S)
• THE NAME(S) AND STREET ADDRESS(ES) OF THE DIRECTOR(S) TO THESE ARTICLES
OF INCORPORATION IS (ARE):
NAME: HAYMEE M. MORENO
ADDRESS: 1819 SW 107 AVE APT 1902 MIAMI, FL 33165
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/ REGISTERED OFFI

<u>CE</u>

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT PLACE DESIGNATED IN THIS CERTIFICATE, 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 RELATED TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

REGISTERED AGENT SIGNATURE