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Florida Department of State

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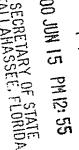
Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)541-3694 Fax Number : (305)541-3770



FLORIDA PROFIT CORPORATION OR P.A.

MEDICAB, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

6/15/00 10:57 AM

HUUUUUUJA ARTICLES OF INCORPORATION OF MEDICAB, INC

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act., hereby adopt the following Articles of Incorporation.

ARTICLE I.-NAME:
The name of the corporation shall be: MEDICAB, INC

ARTICLE II .- PRINCIPAL OFFICE:

The principal place of business and mailing address of this corporation 3125 SW 24 St., Miami, F1 33145 shall be:

ARTICLE III.-SHARES:

The number of shares of stock that this corporation is authorized to have outstanding at any time is: 1,000 common shares each having par value of \$ 0.50.

ARTICLE IV.-INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and address of the initial registered agent is:

Elda A. Guerra 3125 SW 24 St Miami, Fk 33145

ARTICLE V .- OFFICERS:

The name of the persons who are to serve as officers of the corporation until the first meeting of the Board of Directors are:

Hector J. Samper Vice-pres. Elda A. Guerra President & Treasurer & Secretary

ARTICLE VI.-INCORPORATOR(S): The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Elda A. Guerra 3125 SW 24 St Miami, Fl 33145

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 14nd day of June ,2000.

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 inthis capacity.

Elda a Hum

Corporation prepared by Jose C. Eduartez, Accountant P.O. Box 40-2663, Miami Beach, Fl 33140

Tel. (305) 374-5004

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