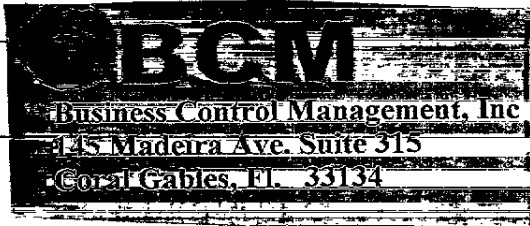


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Requester's Name



400003338024--3  
-07/27/00--01047--014  
\*\*\*\*122.50 \*\*\*\*78.75

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

FILED  
09 AUG 11 AM 10:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

- ☐ Walk in ☐ Pick up time ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

T BROWN AUG 14 2000  
Examiner's Initials

CR2E031(7/97)



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

July 31, 2000

BUSINESS CONTROL MANAGEMENT, INC.  
145 MADEIRA AVENUE  
SUITE 315  
CORAL GABLES, FL 33134

SUBJECT: EAST-WEST DIAGNOSTIC CENTER, INC.  
Ref. Number: W00000019017

We have received your document for EAST-WEST DIAGNOSTIC CENTER, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

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) 487-6933.

Teresa Brown  
Corporate Specialist

Letter Number: 600A00041510

**Certificate of Incorporation**  
**of**

**FILED**  
00 AUG 11 AM 10:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**East-West Diagnostic Center, Inc.**

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We, The undersigned, hereby associated ourselves together for the purpose of becoming a corporation under the laws of the State of Florida by and under the provisions of the statutes of the State of Florida, providing for the formation, rights, privileges, immunities and liabilities for profit.

**ARTICLE I**

The name of the corporation shall be: EAST-WEST DIAGNOSTIC CENTER, INC.

**ARTICLE II**

The corporation will engage in any activity or business permitted under the laws of the State of Florida and of the United States of America.

**ARTICLE III**

The maximum number of shares which the corporation is authorized to issue and have outstanding at any one time is 1000 shares of common stock, which shares shall be of one dollar each (\$1.00).

**ARTICLE IV**

The pledge, sales, transfer or other disposition of the capital stock may be governed and restricted by the by-laws or written agreement among the stockholders which shall be on file in the office of the corporation.

**ARTICLE V**

The amount of capital with which corporation may begin doing business shall be not less than one hundred dollars (\$100.00).

### ARTICLE VI

The existence of the corporation is perpetual.

### ARTICLE VII

The initial post office address of the principal office of the corporation in the State of Florida is: 7740 West 28 Av. Suite 206 Hialeah, Fl. 33016


The Board of Directors may, from time to time, move the principal office to any other address in the State of Florida. The registered address of corporation is: *145 Madeira Av. Suite 315 Coral Gables, Fl. 33124*

The registered Agent at the registered address is: *Ramiro J. Perez*

### ARTICLE VIII

The name of the Incorporator and Address is

*Ramiro J. Perez*  
*145 Madeira Av. Suite 315*  
*Coral Gables, Fl 33134*

 INCORPORATOR

### ARTICLE IX

The business of the corporation shall be managed by a Board of Directors consisting of not less than one (1) nor more than two (2) directors. A quorum for the holding of meetings of the board of directors and for the transaction of any business which will be properly done by the directors on behalf of the corporation shall consist of a majority of the members thereof; but the directors, by unanimous consent in writing, included among the minutes of the corporation, may consent to the doing of and act and such consent in writing shall have the same force and effect as though a formal meeting had been held pursuant to call being duly made and as though the said act had been present, or such duties may be delegated to an Executive Committee.

### ARTICLE X

The names and post office addresses of the members of the first Board of Directors and the state of Corporate Officers are as follows:

<u>NAME</u>	<u>TITLE</u>	<u>ADREESS</u>
1- Luis A. Diaz	President	7740 W. 28 Av. Suite 206 Hialeah, Fl 33016
2-		
3-		
4-		
5-		

### ARTICLE XI

The names and post office addresses of the subscribers of the articles of incorporation and number of shares that they agree to take are:

<u>NAME</u>	<u>ADDRESS</u>	<u>No. OF SHARES</u>
1- Luis A. Diaz	7740 W. 28 Av. Suite 206 Hialech Fl. 33016	100%
2-		
3-		

### ARTICLE XII

The stock of the corporation may be issued pursuant to the provisions of Section 1244 of the Internal Revenue Code, so that the stockholders of the corporation may receive the benefits provided there under.

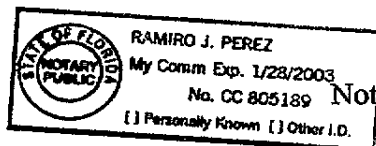
IN WITNESS WHEREOF, we have hereunto set our hands and seal this 25 days of July /2000.

STATE OF FLORIDA )  
COUNTY OF DADE )

I HEREBY CERTIFY THAT on this day, personally appeared before me, an officer duly authorized to administer oaths and taken acknowledgments under the laws of the State of Florida,

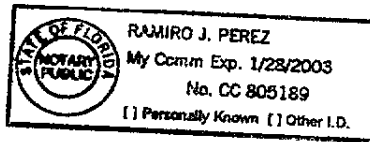
To me well known to be the persons described in and who executed the foregoing Certificate of Incorporation, and acknowledged before me that they executed the same freely and voluntary for the purpose there in expressed.

WITNESS my hand official seal at City of Miami, State of Florida, this 25 day of July /2000.



Mr. *Ramiro J. Perez*  
Notary Public, State of Florida at Large

My Commission Expires:



Certificate designation place of business or domicile for the service of process within Florida, naming Agent upon whom process may be served.

In compliance with Section 48.091, Florida Statutes, the following is submitted:

First, that: **EAST-WEST DIAGNOSTIC CENTER, Inc.**  
(Name of Corporation)

Desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at City of Miami, State of Florida, has named

*Ramiro J. Perez*  
(Name of Registered Agent)

located at *145 Madeira Av. Suite 315 Coral Gables, FL 33134*  
(Street address and number of building)  
(Post office box address is not acceptable)

City of Miami, State of Florida, as its Agent to accept service of process within Florida.

Signature

Title:

President

Date

7/25/00

Having been named to accept service of process for above state corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Signature

(Registered Agent)

Date:

7/28/2000

**FILED**  
00 AUG 11 AM 10:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA