

PO1000103031



ACCOUNT NO. : 072100000032

REFERENCE : 120430 162199A

AUTHORIZATION :

COST LIMIT : \$ PPD

FILED
2001 OCT 22 PM 1:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ORDER DATE : October 22, 2001

ORDER TIME : 11:13 AM

ORDER NO. : 120430-005

CUSTOMER NO: 162199A

CUSTOMER: Rick M. Morse, Cpa
Rick M. Morse, Cpa, P.a.

Suite 300
1700 University Drive
Coral Springs, FL 33071

000004647940--8

-10/22/01--01029--018
*****78.75 *****78.75

DOMESTIC FILING

NAME: ~~A.N., INC.~~

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder EXT. 1118

EXAMINER'S INITIALS:

2544

W001-24385

RECEIVED
01 OCT 22 PM 12:28
DIVISION OF CORPORATION

10/24/01

10689 NW 48TH STREET
CORAL SPRINGS, FLORIDA 33076

2001 OCT 22 PM 1:23

SECRETARY OF STATE
TALLAHASSEE FLORIDA

OCTOBER 18, 2001

SECRETARY OF STATE
CORPORATION DIVISION
THE CAPITOL
TALLAHASSEE, FLORIDA 32301

Re: Articles of Incorporation

Dear Sirs,

Enclosed you will find my check in the amount of \$78.75 which pays the filing fee, Resident agent fee, and certified copy of the Articles of Incorporation included herein.

Thank you for your consideration in this matter, and if you have any questions, please contact me immediately.

Very truly yours,



ALLEN REBACK
Director



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

2001 OCT 22 PM 1:23

SECRETARY OF STATE
TALLAHASSEE FLORIDA

October 22, 2001

CSC NETWORKS
1201 HAYS STREET
TALLAHASSEE, FL 32301

SUBJECT: A.N., INC.
Ref. Number: W01000024385

RESUBMIT
Please give original
submission date as file date.

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

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6973.

Claretha Golden
Document Specialist
New Filings Section

Letter Number: 701A00058086

RECEIVED
01 OCT 24 AM 11:28
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

A.N. OF SOUTH FLORIDA, INC.

2001 OCT 22 PM 1:23

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I

NAME

The name of this Corporation shall be :

A.N. OF SOUTH FLORIDA, INC. _____

ARTICLE II

PURPOSE

This corporation is organized for the purpose of **THERAPEUTIC
MASSAGE & SPA** and transacting any and all lawful business.

ARTICLE III

CAPITAL STOCK

This corporation is authorized to issue 2000 shares of \$ 1
par value common stock.

ARTICLE IV

INITIAL PRINCIPAL OFFICE AND REGISTERED AGENT

The street address of the initial principal office of this
corporation is:

**10689 NW 48TH STREET
CORAL SPRINGS, FLORIDA 33076**

and the name of the initial registered agent of this
corporation at the above address is:

ALLEN REBACK

ARTICLE V

DIRECTORS

This corporation shall have one Director initially. The number of Directors may be either increased or diminished from time to time by the By-Laws but shall never be less than one. The name and address of the initial Directors of this corporation is:

ALLEN REBACK
10689 NW 48TH STREET
CORAL SPRINGS, FL 33076

NAZEEMA MOONAB
761 NW 38TH STREET
FORT LAUDERDALE, FL 33309

ARTICLE VI

INCORPORATOR

The name and address of the person signing these Articles is:

ALLEN REBACK
10689 NW 48TH STREET
CORAL SPRINGS, FLORIDA 33076

ARTICLE VII

POWERS

This corporation shall have all of the corporate powers enumerated in the Florida General Corporation Act.

ARTICLE VIII

INDEMNIFICATION

The corporation shall indemnify any officer or director or former officer or former director to the full extent permitted by law.

ARTICLE IX

AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any Amendment to them, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation on this 19th day of October, 2001

Allen Reback

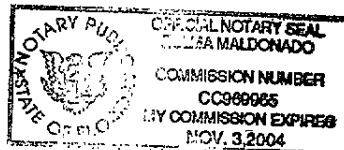
STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this 19th DAY of October, 2001 ALLEN REBACK appeared before me the undersigned authority, to me well known and known to me to be the individual described in and who executed the foregoing Articles of Incorporation, and acknowledged before me that he executed the same, freely and voluntarily for the purpose therein expressed.

Julio Maldonado
Notary Public

ss: My Commission Expires:

11-3-2004



CERTIFICATE DESIGNATION PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA. NAMING AGENT UPON WHICH PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED;

A.N. OF SOUTH FLORIDA, INC.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA.

WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF CORAL SPRINGS FLORIDA HAS NAMED ALLEN REBACK LOCATED AT 10689 NW 48TH ST. CORAL SPRINGS, FLORIDA 33076 IS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE *Allen Reback*
CORPORATE OFFICER
TITLE *President*
DATE *10/19/01*

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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 *Allen Reback*
DATE *10/19/01*

2001 OCT 22 PM 1:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA