

P020000007339

TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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-01/16/02--01092--003
*****87.50 *****87.50

INTERCONTINENTAL HEALTH CORPORATION

SUBJECT: _____
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00	<input type="checkbox"/> \$78.75	<input type="checkbox"/> \$78.75	<input checked="" type="checkbox"/> \$87.50
Filing Fee	Filing Fee	Filing Fee	filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
			Status

ADDITIONAL COPY REQUIRED

FROM: KHALID EDREES

PO BOX 831181

MIAMI, FLORIDA 33283

(305) 297 - 9866

FILED
02 JAN 16 AM 10:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name (Printed or typed)

Address

City, State & Zip

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

J. BRYAN JAN 23 2002

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F. S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: INTERCONTINENTAL HEALTH CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: PO BOX 831181, MIAMI, FL 33283

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ENGAGE IN THE MANUFACTURING, DISTRIBUTION, SALES AND IMPORT AND EXPORT OF MEDICAL & SURGICAL GOODS, RELATED PRODUCTS AND ALL OTHER ACTS PERMITTED GENERAL BUSINESS CORPORATION.

ARTICLE IV SHARKS

The number of shares of stock is: ONE THOUSAND SHARES, ONE U.S. DOLLAR EACH

ARTICLE V INITIAL OFFICERS/DIRECTORS (Optional)

The name(s), address(es) and title(s):

PRESIDENT:	KHALID EDREES	5755 NW 115 CT. #109, MIAMI, FL 33178
VICE PRES.:	JESSICA MENDEZ	5755 NW 115 CT. #109, MIAMI, FL 33178
TREASURER:	KHALID EDREES	5755 NW 115 CT. #109, MIAMI, FL 33178
SECRETARY:	JESSICA MENDEZ	5755 NW 115 CT. #109, MIAMI, FL 33178

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

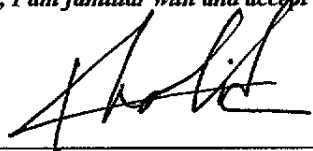
KHALID EDREES 5755 NW 115 COURT #109, MIAMI, FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KHALID EDREES 5755 NW 115 COURT #109, MIAMI, FL 33178

Having been named as registered agent to accept services of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

Jan. 10, 2002

Date



Signature/Incorporator

Jan. 10, 2002

Date