

P02000012943

OMNI BUSINESS SERVICES, INC

2427 BISCAYNE BLVD

MIAMI, FLORIDA 33137

Ph:(305) 576-7755. Fax: (305) 576-9107

Florida Department of State

Division of Corporations

P.O. BOX 6327

Tallahassee, Florida 32314

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-01/30/02--01039--004
*****78.75 *****78.75

Gentlemen:

Enclosed you will find the Articles of Incorporation of
EXPERT HEALTH CARE SERVICES, INC along with a check
in the amount of \$ 78.75. Please register it for me.

Thanking you for your courtesy, I remain.....

Sincerely Yours,

Emmanuel Regis
President

FILED
02 JAN 30 PM 12:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

02-05-07

**ARTICLES OF INCORPORATION
OF
EXPERT HEALTH CARE SERVICES, INC**

FILED
02 JAN 30 PM 12: 28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned incorporator hereby make, subscribe, acknowledge and file with the Department of State these Articles of Incorporation for the purpose of forming a Corporation for profit in accordance with the Laws of the State of Florida.

ARTICLE I-NAME:

The name of this corporation shall be:

EXPERT HEALTH CARE SERVICES, INC

ARTICLE II- GENERAL NATURE OF BUSINESS:

This Corporation may engage in activity or business permitted under the laws of the United States of America, and the State of Florida.

ARTICLE III-CAPITAL STOCK:

The maximum number of shares which the corporation shall have authority to issue is the total sum of:

SHARES:	PAR VALUE
<u>40,000</u>	<u>\$1.00</u>

which shall be designated "Common Shares". Each of said shares of stock shall entitle the holder thereof to one (1) vote at any meeting of the stockholders. All or any part of said Capital Stock may be paid for in cash, in property (other than stock or securities) or in labor or services at a fair valuation to be fixed by the incorporator or by the Board of Directors at a meeting called for such purpose. All stock when issued shall be fully paid for and shall be non-assessable.

ARTICLE IV-TERM OF CORPORATE EXISTENCE:

The corporation shall have perpetual existence.

ARTICLE V-INITIAL REGISTERED OFFICE AND INITIAL REGISTERED AGENT:

The following shall be the street address of the initial registered office of this Corporation and the name of its initial registered agent at such address.

ADDRESS OF OFFICE:

AGENT AT SUCH ADDRESS

NICKETTE JEAN-PIERRE

7585 NW 71ST TERRACE
POMPANO BEACH, FL 33067

IT IS ALSO THE MAILING ADDRESS OF THIS CORPORATION.

ARTICLE VI-DIRECTORS:

There shall be a Board of Directors for this Corporation which shall consist of not less than one (1). Each of said director shall be of full age.

ARTICLE VII-INITIAL BOARD OF DIRECTORS IS/ARE:

DIRECTORS:

ADDRESS

NICKETTE JEAN-PIERRE

7585 NW 71ST TERRACE

“ ”

POMPANO BEACH, FL 33067

The members of the first board of Director, unless otherwise provided by the By-Laws, shall hold office for the first year of the existence or until their successors are selected or appointed and qualified

ARTICLE VII-SUBSCRIBERS:

NAME	ADDRESS	NUMBER OF SHARES
NICKETTE JEAN-PIERRE “ ”	7585 N.W. 71 ST TERRACE POMPANO BEACH, FL 33067	30,000

ARTICLE IX-OFFICERS:

The officer of this Corporation shall be a President who shall be a Director, a Secretary and a Treasurer and such officer, agent and factor as may deemed necessary.

OFFICERS:**ADDRESS**

NICKETTE JEAN-PIERRE “ ”	PRESIDENT	7585 NW 71 ST TERRACE POMPANO BEACH, FL 33067
NICKETTE JEAN-PIERRE “ ”	TREASURER	7585 NW 71 ST TERRACE POMPANO BEACH, FL 33067
NICKETTE JEAN-PIERRE “ ”	SECRETARY	7585 NW 71 ST TERRACE POMPANO BEACH, FL 33067

ARTICLE X- AMENDMENT:

The corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation in the manner now or hereafter prescribed by the laws of the State of Florida and all rights conferred upon stockholder herein after are subject to this reservation.

IN WITNESS WHEREOF, the undersigned incorporators have executed these Articles of Incorporation this
26th DAY OF JAN 2002.

Signatures of Incorporators:



NICKETTE JEAN-PIERRE / PRESIDENT



NICKETTE JEAN-PIERRE / PRESIDENT

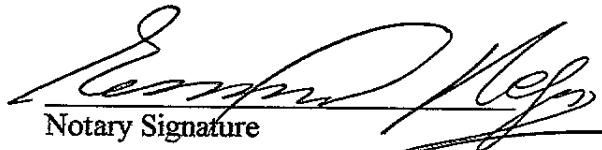


NICKETTE JEAN-PIERRE / PRESIDENT

State of Florida

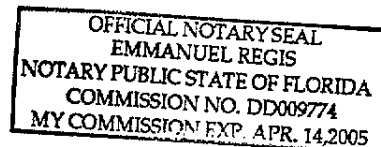
County of Miami-Dade

The foregoing instrument was acknowledged and sworn to me before this
26th Day of JAN 2002.



Notary Signature

My Commission Expires:




**CERTIFICATE DESIGNATED
REGISTERED AGENT / REGISTERED OFFICE**

Pursuant to the prevention of section 607.325, Florida Statutes, the undersigned Corporation, organized under the Laws of the State of Florida, submits the following statement designating the registered agent in the State of Florida.

- 1- The name of the Corporation is:
EXPERT HEALTH CARE SERVICES, INC
- 2- The name and address of the registered agent and office is:
**NICKETTE JEAN-PIERRE
7585 NW 71ST TERRACE
POMPANO BEACH, FL 33067**

IT IS ALSO THE MAILING ADDRESS OF THIS CORPORATION


Signature / Corporate Officer

Date: 01-26-2002

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 provision of all statutes relative to the proper and complete performance of my duties, and I accept the duties, and obligation of section 607.325 Florida Statutes.

Signature: 

Date: 01-26-2002

I hereby certify that on this day before me, a notary public duly authorized in the State and County named above to take acknowledgements personally appeared:

NAME: **NICKETTE JEAN-PIERRE** to me know to be the person described as registered agent.

State of Florida
County of Miami-Dade

The foregoing instrument was acknowledged and sworn to before me this 26th Day of JAN 2002


Notary Signature

My Commission Expires

