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## Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

#### Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : INCORPORATETIME.COM, INC.

Account Number: 119990000221 Phone: (631)224-9004 Fax Number: (631)224-7979

## FLORIDA PROFIT CORPORATION OR P.A.

MEDICAL NEEDS INC.

Certificate of Status	0
Certified Copy	0
Page Count	(03)
Estimated Charge	\$70.00

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https://ccfss1.dos.state.fl.us/scripts/efilcovr.exe

5/3/2002

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#### **ARTICLES OF INCORPORATION**

THE UNDERSIGNED INCORPORATION FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION.

#### ARTICLE I -NAME

THE NAME OF THE CORPORATION SHALL BE:

MEDICAL NEEDS INC.

### ARTICLE II -PRINCIPAL OFFICE

The principal place of business & mailing address of this corporation shall be

491 SW 7 St. Hallandale, FL 33009

#### ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have at any one time is:

2,000 shares at \$.01 par value

#### ARTICLE IV -INITIAL OFFICERS/DIRECTORS:

President/Director: Madelyn Guzman, 491 SW 7 St., Hallandale, FL 33009

### ARTICLE V -INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address of the initial registered agent are:

Madelyn Guzman 491 SW 7 St., Hallandale, FL 33009 O2 MAY -3 MM 9: 03

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#### ARTICLE VI-INCORPORATOR:

The name and address of the Incorporator to these Articles of Incorporation are:

Kerry Walsh Incorporatetime.com, Inc. 35-37 Carleton Avenue Islip Terrace, NY 11752

Kerry Walsh, Incorporator

5/3/02

Date

Having been named registered agent and to accept service of process for the above stated corporation as the place designated in this certificate I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

1 / adulum Tuman Madelyn Guzman . Registered Agent

04/29/0

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SECRETARY OF STATE