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TRANSMITTAL LETTER

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

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
02 MAY 22 PM 2:17

SUBJECT: PEMBROKE CLINICAL TRIALS  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: GUSTAVO MARTINEZ  
Name (Printed or typed)

5580 SW 162 AVE  
Address

SW RANCHES FL 33331  
City, State & Zip

954 680 4732  
Daytime Telephone number

680005597426--9  
-05/22/02--01040--008  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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

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KONGESSER MAY 22

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**ARTICLES OF INCORPORATION OF  
PEMBROKE CLINICAL TRIALS, INC.**

THE UNDERSIGNED, for the purpose of forming a corporation for profit pursuant to Chapter 607, Florida Statutes, does hereby adopt the following Articles of Incorporation:

WITNESSETH:

**ARTICLE I**

The name of the Corporation is **PEMBROKE CLINICAL TRIALS.**

**ARTICLE II**

DURATION

This Corporation shall have perpetual existence commencing on the date of filing of these ARTICLES OF INCORPORATION with the Department of State of Florida.

**ARTICLE III**

PURPOSES

This Corporation is organized for the purposes of transacting any and all lawful business.

**ARTICLE IV**

CAPITAL STOCK

This Corporation is authorized to issue 200 shares of U.S. 100.00 per value common stock

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## **ARTICLE V**

### **QUORUM FOR STOCKHOLDERS MEETING**

Unless otherwise provided for the incorporation's BY - LAWS a majority of the shares entitled to vote, represented in person or by proxy, shall be required to constitute a quorum at a meeting of shareholders.

## **ARTICLE VI**

### **INITIAL REGISTERED OFFICE AND REGISTERED AGENT**

The street address of the initial registered office of this CORPORATION is :  
600 North Hiatus Road, Pembroke Pines, Fl. 33026 and the name of the registered agent of this CORPORATION at such address is Gustavo A. Martinez at the same address.

## **ARTICLE VII**

### **INITIAL BOARD OF DIRECTORS**

This Corporation shall have two directors initially, the number of directors may be either increased or diminished from time to time in the manner provided in the BY LAWS, but shall never be less than one. The name and the address of the initial directors is as follows:

ROSMIRA EGHER - PRESIDENT  
600 North Hiatus Road  
Pembroke Pines. Fl. 33026

GUSTAVO A MARTINEZ -SECRETARY/TREASURER  
600 North Hiatus Road  
Pembroke Pines, Fl. 33026

## **ARTICLE VIII**

### **INCORPORATORS**

The name and address of the Corporations Incorporator is :  
ROSMIRA EGHER  
600 North Hiatus Road  
Pembroke Pines, Fl. 33026

**ARTICLE IX**

**INDEMNIFICATION**

The CORPORATION shall indemnify its officers, directors and authorized agents for all liabilities incurred directly, incidentally or indirectly to services performed for the CORPORATION, to the fullest extent permitted under the FLORIDA law existing now or hereinafter enacted.

\*\*\*\*\*

IN WITNESS WHERE OF, We have subscribed our name this      day of  
2002.

I am hereby familiar with and accept the duties and responsibilities as registered  
agent for PEMBROKE CLINICAL TRIAL, INC.

*Rosmira Egher.*  
\_\_\_\_\_  
Rosmira Egher.

STATE OF FLORIDA

S.S.

COUNTY OF DADE

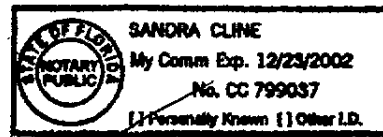
16th OF MAY

On this ~~23rd~~ day of ~~April~~ 2002, before me, a Notary Public authorized to take acknowledgment in the State and in the County set forth above, personally appeared before me ROSMIRA EGHER known to me to be the person whose name are subscribed to the foregoing instrument and acknowledged that they executed it for the purposes therein contained.

IN WITNESS WHEREOF, I have here unto set my hand and official SEAL:

SANDRA CLINE

Notary Public  
State of Florida



MAY 16-2002

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