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Annual Report Fictitious Name Name Reservation	REGISTRATION/ QUALIFICATION Foreign Limited Partnership		· * - 224 . , ·	
<u> </u>	Reinstatement Trademark			

Other

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Examiner's Initials

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

02 JUN 19 AM 11: 37

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

GIJE Diagnostic Center Inc.

<u> ARTICLE II – PRINCIPAL OFFICE</u>

The principal place of business and mailing of this corporation shall be:

351 LeJeune Rd. # 102 miami FC 33126

ARTICLE III -SHARES

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

100 Shapes Common STOCK \$1.00 PAR Value

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MARGARITA VAZquez 11790 SW 18 St #530 Mismi FL 33175

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ARTICLE V - INCORPORATOR

The name and street address of the incornorator to these Articles of

THE HAINE WING SCIECE	MMMI COS OF CHE III	corporator to theory in	
Incorporation is:			
MARGARITA	VAZZUEZ	11750 SW 10	PS# 530
MAKOUNT	7	man EC	95/55

The undersigned incorporator has executed these Articles of Incorporation this 18 day of 500 2002

Signature

ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

MARGARITA VAZQUEZ PRESIDENT

Roberto Rossell - Vice-President

LAZARO MARTINEZ TreASURER

351 Lejeuno Rd # 102 mismi PC 33126

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature