

JAN 23 2003 1:55 AM

NO. 0031

1 of 2

P03000008678

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 205-0381

From:

Account Name : BEST MEDICAL REHABILITATION, INC.  
Account Number : I19990000019  
Phone : (305) 345-7448  
Fax Number : (305) 644-7748

FILED  
03 JAN 23 AM 10:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT CORPORATION OR P.A.**

**ON-SITE Rehabilitation Center Inc.**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

VF  
1-24-03

JAN. 23. 2003 11:59AM

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NO. 6031 P. 2

## Articles of Incorporation

FILED

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

60 JAN 23 AM 10:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE I NAME

The name of the corporation shall be:  
**On-Site Rehabilitation Center Inc.**

### ARTICLE II PRINCIPAL OFFICE

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

6876 West Flagler Street  
Miami, Florida 33144

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:  
The number shares which this corporation shall have the authority to issue is 100 shares of common stock NO PAR VALUE. Each share shall have equal rights to each other share with respect to dividends voting and in liquidation.

### ARTICLE IV INITIAL REGISTERED AGENT & STREET ADDRESS

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

Yemile Vera  
601 S.W. 123rd Avenue  
Miami, Florida 33184

### ARTICLE V INCORPORATOR

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

Yemile Vera  
601 S.W. 123rd Avenue  
Miami, Florida 33184

### ARTICLE VI OFFICERS AND DIRECTORS

Yemile Vera - DP  
601 S.W. 123rd Avenue  
Miami, Florida 33184

Signature/Incorporator

Date

( An additional article must be added if an effective date is requested. )

Having been named as registered agent and to accept service of process for the above stated corporation at 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 fully qualified and accept the obligations of my position as registered agent.

Signature/Registered Agent

Date

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