

Pb3000014165

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



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(Business Entity Name)

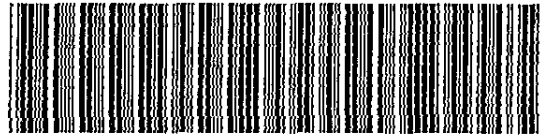
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

Subject: Centro de Medicina Preventiva Doc's Choices, Inc.
(proposed corporate name)

Enclosed please find an original and two(2) copy of the articles of incorporation
and a check for: \$87.50

FROM:

Mr. Leonardo Calderón
1088 E Altamonte Drive Suite #103
Altamonte Springs, Florida 32701

**ARTICLES OF INCORPORATION
OF
CENTRO DE MEDICINA PREVENTIVA DOC'S CHOICES, INC.**

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:

CENTRO DE MEDICINA PREVENTIVA DOC'S CHOICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

1088 E Altamonte Drive, Suite #103
Altamonte Springs, Florida 32701

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have--
outstanding at any one time is: Ten thousand shares of common stock with a--
par value of One dollar (\$1.00).

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Leonardo Calderón
102 Windy Dune Ct.
Kissimmee, Florida 34743

ARTICLE V INCORPORATOR

Leonardo Calderón
102 Windy Dune Ct.
Kissimmee, Florida 34743

ARTICLE VI PURPOSE

General medical services.

Having been named as registered agent and to accept service of process for the above stated corporation at the office designated in this certificate, I hereby accept to act in this capacity.

Signature/Registered Agent

Date 01/27/2003

Signature/Incorporator

Date 01/27/2003

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TALLAHASSEE FLORIDA

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