

P03000020528

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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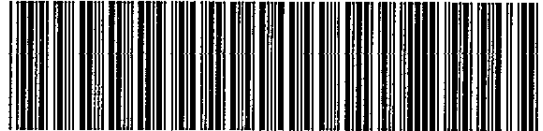
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
03 FEB 18 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Par# Professional Center, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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:

Dr. Shoukry Soliman

Name (Printed or typed)

1615 Farrier Trail

Address

Clearwater, FL 33765-1720

City, State & Zip

(727) 791-7299

Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME

The name of the corporation shall be:

Park Professional Center, Inc.

03 FEB 18 PM 12:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2701 Park Drive #7
Clearwater, FL 33763

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Commercial Rental

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Dr. Shoukry Soliman
1615 Farrier Trail
Clearwater, FL 33765-1720

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dr. Shoukry Soliman
1615 Farrier Trail
Clearwater, FL 3376501720

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Shoukry Soliman
Signature/Registered Agent

2/13/03
Date

Shoukry Soliman
Signature/Incorporator

2/13/03
Date