P03000/078723

**78.75

(Requestor's Name) (Address) (Address)	600023273066	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	09/30/0301007001 **?	
(Document Number) Certified Copies Certificates of Status		
Special Instructions to Filing Officer: Office Use Only	03 SEP 29 PH 2: 40	

TRANSMITTAL LETTER

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

Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	Jax Desen	se Centes	Inc.
-	2350 W	(Printed or typed) 8445 Street Address	1#20
-	Hisleah City,	41 330 State & Zip	16
-	305-8	325-250	0

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

ARTICLES OF INCORPORATION OF SAHARA MEDICAL CENTER, INC.

We, the undersigned, all of whom are of legal age, do hereby associate ourselves for the purpose of becoming a corporation under the laws of the State of Florida authorizing the formation of corporations.

ARTICLE I

The name of this corporation shall be:

SAHARA MEDICAL CENTER, INC.

ARTICLE II

The purpose is to engage in any activities of business permitted under the laws of the United States and the State of Florida.

SEP 29 PM 2: 00

ARTICLE III

It shall have authority to issue 100 shares of stock, all of one class, with \$ 1.00 par value.

ARTICLE IV

The corporation shall begin with \$ 100.00 capital.

ARTICLE V

The period of its duration is perpetual.

ARTICLE VI

The address of its principal office is:

7395 SW 19TH STREET RD MIAMI, FL 33155

ARTICLE V11

The number of directors constituting its initial Board of Directors is (2) whose name(s) and address(es) is (are):

Sahara Tejera 7395 SW 19th Street Rd Miami, FL 33155 President

> Jose Pascual 1820 W 46th Street Hialeah, FL 33012 Vice -President

ARTICLE V111

The name and address of the subscriber is:

Sahara Tejera 7395 SW 19th Street Rd Miami, FL 33155

ARTICLE IX

The registered agent and registered office for the corporation shall be:

TAX DEFENSE CENTER, INC. 2350 W 84th Street #20 Hialeah, FL 33016

ARTICLE X

Shareholders shall be entitled to preemptive rights,

Sahara Tejera

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.
IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST THAT **SAHARA MEDICAL CENTER, INC.** OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE CITY OF **MIAMI**,

STATE OF FLORIDA HAS NAMED TAX DEFENSE CENTER, INC. AS ITS AGENTS TO ACCEPTISERVICE OF PROCESS WITHIN FLORIDA.

Signature:

Sahara Tejera

Title: PRESIDENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

Signature:

Elysabet Montanez Tax Defense Center, Inc.

Date: <u>1-25-03</u>

