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

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
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FLORIDA PROFIT CORPORATION OR P.A.

A. B. PHARMACY CORPORATION

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ARTICLES OF INCORPORATION

OF

A. B. PHARMACY CORPORATION.,

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THE UNDERSIGNED ACTING AS SUBSCRIBER OF A CORPORATION UNDER THE FLORIDA CORPORATION LAW, ADOPT THE FOLLOWING ARTICLES OF INCORPORATION FOR SUCH CORPORATION.

ARTICLE I

THE NAME OF THE CORPORATION IS, A. B. PHARMACY CORPORATION.

ARTICLE II

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED TO ENGAGE IN ANY ACITIVITIES OR BUSINESS PERMITTED UNDER THE LAW OF THE UNITED STATES AND THE STATE OF FLORIDA.

ARTICLE III

THE MAXIMUM OF SHARES WHICH THE CORPORATION IS AUTHORIZED TO HAVE ISSUED AND HAVE OUTSTANDING AT ANY ONE TIME IS 50 SHARES OF COMMON STOCK, AS WHICH COMMON SHALL BE OF NO PAR VALUE. ALL STOCK IS TO BE ISSUED AS FULLY PAID AND EXEMPT FROM ASSESSMENT.

ARTICLE IV

THE CAPITAL WITH WHICH THE CORPORATION SHALL BEGIN BUSINESS IS NOT LESS THAN FIVE HUNDRED DOLLARS.

ARTICLE V

THE EXISTENCE OF THE CORPORATION IS PERPETUAL.

ARTICLE VI

THE INITIAL POST OFFICE ADDRESS AND PRINCIPAL OFFICES OF THE CORPORATION IN THE STATE OF FLORIDA SHALL BE AT 1956 W, FLAGLER SRREET, MIAMI, FLORIDA 33135

ARTICLE VII

THE BOARD OF DIRECTORS MAY FROM TIME TO TIME MOVE THE PRINCIPAL OFFICES TO AND OTHER ADDRESS WITHIN THE STATE OF FLORIDA.

ARTICLE VIII

THE NUMBER OF DIRECTORS CONSTITUTING THE INITIAL BOARD OF DIRECTORS CONSISTING OF NOT LESS THAN (1) NOR MORE THAN (5).

ARTICLE IX

THE NAME AND POST OFFICE ADDRESSES OF THE MEMBERS OF THE FIRST BOARD OF DIRECTORS AND SLATE OF CORPORATE OFFICERS ARE,
MANUEL DE JESUS VEGA, PRESIDENT, SECRETARY & TREASURER, 1956 W. FLAGLER ST,
MIAMI, FLORIDA 33135.

ARTICLE X

NO STOCKHOLDERS OF THE CORPORATION SHALL BE PERMITTED TO SELL OR OFFER FOR SALE HIS SHARES OF THE STOCK IN THE CORPORATION WITHOUT FIRST OFFERING SAID SHARE FOR SALE TO ALL OTHER STOCKHOLDERS OF THE CORPORATION, AT THEIR BOOK VALUE. THE REMAINING STOCKHOLDERS MAY PURCHASE ALL OR ANY PART OF THE SHARES OF STOCK OFFERED FOR SALE BY THE OTHER STOCKHOLDERS.

ARTICLE XII

THE STOCK OF THE CORPORATION MAY BE ISSUED PURSUANT TO THE PROVISIONS UNDER 1244 OF INTERNAL REVENUE CODE, IN ORDER FOR THE STOCKHOLDERS OF THE CORPORATION MAY RECEIVED THE BENEFITS THERE UNDER.

ARTICLE XII

THE NAME AND POST OFFICE ADDRESS OF THE PERSON SUBSCRIBED THIS ARTICLES OF INCORPORATION IS, MANUEL DE JESUS VEGA, 1956 W. FLAGLER ST
MIAMI, FL 33135.

ARTICLE XIII

IN WITNESS WHEREOF, WE HAVE HEREUNTO SET OUR HANDS AND SEALS
THIS 08 DAY OF DECEMBER, 19 2003.

Manuel D Vega (SEAL)
SUBSCRIBED.
Manuel D Vega (SEAL)
REGISTERED AGENT.
_____(SEAL)

STATE OF FLORIDA)
COUNTY OF DADE)

I HEREBY CERTIFY THAT ON THIS DAY PERSONALLY APPEARED BEFORE ME,
AND OFFICER DULY AUTHORIZED TO TAKE ACKNOWLEDGMENTS AND ADMINISTAR
OATHS IN THE STATE OF FLORIDA. _____

TO ME WELL KNOWN TO BE THE PERSONS DESCRIBED IN AND WHO EXECUTED
THE FOREGOING ARTICLES OF INCORPORATION, AND WHO ACKNOWLEDGED
BEFORE ME THAT THEY EXECUTED THE SAME FREELY AND VOLUNTARILLY FOR
THE PURPOSE THEREIN EXPRESSED.

WITNESS, MY HAND AND OFFICAL SEAL THIS 08 DAY OF DECEMBER,
19 2003, AT MIAMI COUNTY OF DADE STATE OF FLORIDA.

NOTARY PUBLIC, STATE OF FLORIDA AT
LARGE.

MY COMMISSION EXPIRES.

FILED

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE

03 DEC -9 AM 9:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES,
THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE
OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE
REGISTERED OFFICE/ REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. THE NAME OF THE CORPORATION IS, A. B. PHARMACY CORPORATION.

2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS.

MANUEL DE JESUS VEGA, 1956 W. FLAGLER STREET, MIAMI, FLORIDA 33135.

SIGNATURE



TITLE

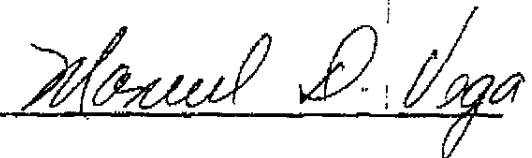
PRESIDENT.

DATE

12/08/2003.

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 AGREED TO COMPLY
WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND
COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND
ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE



DATE

12/08/2003