

Florida Department of State

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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 Fax Number : (305)716-0346 O4 JAN-8 AM 8: 38
SECHENCEY OF STATE
TALLAHASSED, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

BEST REHABILITATION CENTER, INC.

Certificate of Status	0
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Public Access Help

B04000004808 3

04 JAN -8 AM 8: 39

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION Of BEST REHABILITATION CENTER, 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

ARTICLE I NAME

The name of the corporation shall be:

incorporation.

BEST REHABILITATION CENTER, INC.

ARTICLE II PRINCIPAL PLACE OF BUSINESS

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

8804 NW 149 TERR MIAMI, FL 33018

ARTICLE III NATURE OF BUSINESS

The general nature of the business to be transacted by the corporation and its object and powers shall be engage in any activity or business permitted under the laws of the United States and the State of Florida.

5.5

ARTICLE IV CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000 THOUSAND SHARES OF COMMON STOCK OF THE PAR VALUE OF TEN DOLLARS PER SHARE.

The consideration to be paid for each share shall be fixed by the Board of Directors.

ARTICLE V TERM OF EXISTENCE

This Corporation shall have perpetual existence from the date of the incorporates execution and adoption of these Articles of Incorporation.

ARTICLE VI INITIAL REGISTERED AGENT AND OFFICE STREET ADDRESS

The name and address of the initial registered agent is:

EDUARDO CRUZ 8804 NW 149 TERR. MIAMI. FL 33018

ARTICLEEVII DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles Of Corporation is (are);

PRESIDENT/SECRETARY
EDUARDO CRUZ
8804 NW 149 TERR.
MTAMI, FL 33018

ARTICLE VIII INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

PRESIDENT/SECRETARY EDUARDO CRUZ 8804 NW 149 TERR MIAMI, FL 33018

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this January 6, 2004

Signature

Signature

ARTICLE IX AMENDMENTS

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by the Stockholders, and approved at the Stockholder's meeting by a majority of the stock entitle to vote thereon, unless all the Directors and all the Stockholder's sign a written statement manifesting their intention that a certain amendment of these Article of Incorporation be made.

FILED

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SECRETARY OF STATE JALLAHASSEE, FLORIDA

CERTIFICATE DESIGNATING REGISTERED AGENT AND REGISTERED PLACE OF BUSINESS OR DOMICILE FOR THE PROCESS WITHIN THE STATE OF FLORIDA, AND ACCEPTANCE OF AGENT UPON WHOM PROCESS MAY BE SERVED

Pursuant to the provisions of sections 607.0501 or 617.0501, Fiorida Statutes, the Undersigned Corporation, organized under 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:

BEST REHABILITATION CENTER, INC.

2. The name and address of the registered agent and office is:
EDUARDO CRUZ
8804 NW 149 TERR
MIAMI, FL 33018

ACCEPTANCE OF REGISTERED AGENT

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 FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT PURSUANT TO F.S. 607.050(3).

STOLLY FORE

DATE: January 6, 2004