# P04000082197

(Requestor's Name)	
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SECRETARY OF STATE OF STATE OF CAME OF CAME STATE OF STAT

104-1856

# TRANSMITTAL LETTER

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

SUBJECT: Sout	h Fiorida Sonographics,Inc.			
	(PROPOSED CORPORA)	TE NAME - MUST INCL	UDE SUFFIX)	_
C 1	inal and ana (1) same af the anti-	las afinasmantism and	l a albanic fam	
Enclosed are an ong	inal and one (1) copy of the artic	les of incorporation and	a check for:	
\$70.00	<b>☑</b> \$78.75	<b>□</b> \$78.75	□ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
		_	Status	
		ADDITIONAL CO	PY REQUIRED	
		<del>-</del>		
FROM: _M	ahsomeh Haghayegh			
	Name (	Printed or typed)		
	18941 S.W. 32nd Court			0 5
•	A	ddress	<del></del>	* TK
				A
	Miramar, FL 33029			04 MAY 12
•	City,	State & Zip		<b>P</b>
	(954) 430-8460			1: 55
•	Daytime Te	lephone number		22.

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)

### ARTIÇLE I NAME

The name of the corporation shall be:

South Florida Sonographics, Inc.

### PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is: 18941 S.W. 32nd Ct. Miramar, FL 33029

### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

### ARTICLE IV SHARES

The number of shares of stock is:

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Director 1: Christine Requeiferos

1656 West 64th St. Hialeah, FL 33012

Director 2: Mahsomeh Haghayegh

18941 S.W. 32nd Ct. Miramar, FL 33029

# REGISTERED AGENT

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

Mahsomeh Haghayegh 18941 S.W. 32nd Ct. Miramar, FL 33029

# ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kourosh Taheri 

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

05/10/2004 Date 05/20/2004 Date

Providing Ultrasound Services

Signature/Incorporator