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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

FLORIDA PROFIT CORPORATION OR P.A.

MANHATTAN MEDICAL CARE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 OCT -8 AM 9:05**ARTICLES OF INCORPORATION**

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

ARTICLE I NAME

The name of the corporation shall be:

Manhattan Medical Care, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

14701 N. Florida Ave.
Tampa, FL 33613**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Medical Services

ARTICLE IV SHARES

The number of shares of stock is:

10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

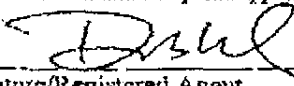
List name(s), address(es) and specific title(s):

Dr. Dipak Shah - President
14701 N. Florida Ave.
Tampa, FL 33613.**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Dr. Dipak Shah
14701 N. Florida Ave.
Tampa, FL 33613**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Dr. Dipak Shah
14701 N. Florida Ave.
Tampa, FL 33613*****
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

Signature/Registered Agent10-8-04

Date

Signature/Incorporator10-8-04

Date

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