

PO4000151149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

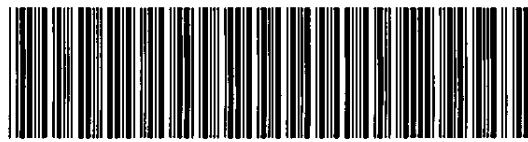
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900128799969

dis

05/08/08--01015--016 **35.00

2008 MAY -8 PM 1:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

2008 MAY -8 AM 11:09
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

18/05/08

**LAZARUS
CORPORATE FILING SERVICE**
3320 SW 87TH AVENUE
MIAMI, FL 33165 (305) 552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. JUANA MEDICAL EQUIPMENT
(Corporation Name) (Document #)
2. JNC
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

Walk in Pick up time 2:00 Certified Copy
 Mail out Will wait Photocopy Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials

FROM

FAX NO.

May. 31 2006 10:02AM P1

FILED

ARTICLES OF DISSOLUTION

2008 MAY -8 PM 1:13

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Florida Department of State:

JUANA MEDICAL EQUIPMENT INC.

SECOND: The document number of the corporation (if known): P04-000151149

THIRD: The date dissolution was authorized: April 23/2008

Effective date of dissolution if applicable: April 23/2008

(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

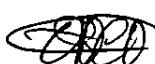
Dissolution was approved by of the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signed this 7 day of May, 2008.

Signature: 

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

Orient B. Carcedo Morales

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35