

JUL-22-2005 10:51

EMPIRE

P.01/02

**P05000102895**

Florida Department of State

Division of Corporations

Public Access System

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 JUL 22 AM 9:45

### Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H05000176694 3)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

**To:**

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

**From:**

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

**FLORIDA PROFIT CORPORATION OR P.A.**

**SIGNATURE MEDICAL SUPPLIES, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

[Electronic Filing Menu](#)

[Corporate Filing](#)

[Public Access Help](#)

D. Brown JUL 25 2005

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

05 JUL 22 AM 9:45

## *Articles of Incorporation*

**Article 1:** Name of Corporation: **SIGNATURE MEDICAL SUPPLIES, INC.**

Address of Corporation: **12228 NW 122<sup>ND</sup> WAY  
MEDLEY, FL 33178**

**Article 2:** Capital Stock: The number of shares which the corporation has authorized to be outstanding at any one time is **50**, with a par value of **NPV**

**Article 3:** REGISTERED AGENT: **ARLEEN J. COLLAZO**

REGISTERED OFFICE: **19420 NW 48<sup>TH</sup> CT  
MIAMI, FL 33055**

\*I am familiar with and hereby accept the duties and responsibilities as Register Agent for said corporation.



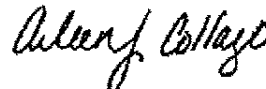
Signature of Registered Agent

**Article 4:** The Board of Directors is: (Board of Directors is NOT REQUIRED).  
First listed is President, Second is Vice President, then Secretary/Treasurer.

1. (P) **ARLEEN J. COLLAZO, 19420 NW 48<sup>TH</sup> CT, MIAMI, FL 33055**
2. (VP) **ERO IGLESIAS, 19420 NW 48<sup>TH</sup> CT, MIAMI, FL 33055**
- 3.

**Article 5:** The NAME and ADDRESS of the INCORPORATOR is:  
**ARLEEN J. COLLAZO  
19420 NW 48<sup>TH</sup> CT  
MIAMI, FL 33055**

In witness whereof, I have subscribed my name:



Signature of Incorporator