# P0700047134

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
(Orly, States Liph Holle ")			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

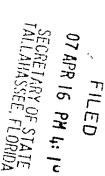




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# **COVER LETTER**

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

SUBJECT: Citecmed, Inc.		
(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and	d a check for:
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	
FROM: Shuaib Abdoel		
Name	(Printed or typed)	
2551 North Rock Island R		
	Address	_
Margate, FL 33063-1229		
City,	State & Zip	
9546504839	Salambana mumikan	
Daytime 1	elephone number	

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)

### ARTICLE I NAME

The name of the corporation shall be:

Citecmed, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2551 North Rock Island Road #107

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sales of Medical Equipment

# ARTICLE IV SHARES

The number of shares of stock is:

75,000

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Hayat Ali, 2551 North Rock Island Road #107, Margate, FI 33063-1229, President Gabriela Pacheco, 2551 North Rock Island Road #107, Margate, FI 33063-1229, Vice-President Shuaib Abdoel, 2551 North Rock Island Road #107, Margate, FI 33063-1229, Treasurer

## ARTICLE VI REGISTERED AGENT

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

Shuaib Abdoel, 2551 North Rock Island Road #107, Margate, FI 33063-1229

## ARTICLE VII **INCORPORATOR**

The <u>name and address</u> of the Incorporator is:

Shuaib Abdoel, 2551 North Rock Island Road #107, Margate, FI 33063-1229

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/Incorporator