

P08000069366

22/08 2:4 PM M: es C any CP Ares _Co any CPA TO: 850 PAGE: 00 OF 05
Division of Corporations Page 1 of 1

Florida Department of State
Division of Corporations
Public Access System

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.

(((H08000178302 3)))



H080001783023ABC\$

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)617-6381

From: Account Name : ARES & COMPANY, C.P.A., P.A.
Account Number : I20000000268
Phone : (305)229-8256
Fax Number : (305)229-8252

RECEIVED
08 JUL 22 PM 4: 28
DIVISION OF CORPORATION

FLORIDA PROFIT/NON PROFIT CORPORATION

ANNA'S CARE CORPORATION

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUL 22 PM 1:02

Electronic Filing Menu Corporate Filing Menu Help

J 7/23/08

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
(((H08000178302 3)))
08 JUL 22 PM 1:02

ARTICLES OF INCORPORATION
OF
ANNA'S CARE CORPORATION

THE UNDERSIGNED has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

ARTICLE I

The name of this corporation shall be:

ANNA'S CARE CORPORATION

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purpose proposed to be transacted and carried on by this corporation are to do any and all things, as fully and to the same extent as natural persons might do, viz:

PREPARED BY: ARES & COMPANY, C.P.A., P.A.
3636 SW 87TH AVE.
MIAMI, FL. 331165
PH: 305-229-8256
FAX: 305-229-8252

(((H08000178302 3)))

(((H08000178302 3)))

Transact any and all lawful business.

- (1) Said corporation shall further have powers:
To have perpetual succession by its corporate name,

ANNA'S CARE CORPORATION

ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 100 shares, having an individual par value of US\$10.00.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V

The name and street address of the initial Registered Agent of this corporation shall be:

**ANABEL MENDEZ
7020 W 2ND WAY
HIALEAH, FL. 33014**

The business principal office and mailing address shall be:

**7020 W 2ND WAY
HIALEAH, FL. 33014**

(((H08000178302 3)))

((H08000178302 3))

ARTICLE VI

The initial Board of Directors and Shareholders shall be composed by TWO (2) persons, whose names and addresses are:

ANABEL MENDEZ - PRESIDENT - 50% SHAREHOLDER
7020 W 2ND WAY
HIALEAH, FL. 33014


ANAHI GONZALEZ - VICE-PRESIDENT - 50% SHAREHOLDER
7020 W 2ND WAY
HIALEAH, FL. 33014

The name and address of the incorporator executing these Articles of Incorporation is:

ANABEL MENDEZ
7020 W 2ND WAY
HIALEAH, FL. 33014

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 22nd day of July, 2008.


ANABEL MENDEZ
PRESIDENT


ANAHI GONZALEZ
VICE-PRESIDENT

((H08000178302 3))

(((H08000178302 3)))

DESIGNATION CERTIFICATE
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the law of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The Name of the Corporation is:

ANNA'S CARE CORPORATION

2. The name and address of the Registered Agent and office is:

ANABEL MENDEZ
7020 W 2ND WAY
HIALEAH, FL. 33014

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE: _____


ANABEL MENDEZ

DATE: _____

07/22/08

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUL 22 PM 1:02

(((H08000178302 3)))