

P95000006444

OFFICE USE ONLY (Document #)

LAZARUS CORPORATE INDUSTRIES, INC.

(Requestor's Name)

890 S.W. 87 AVENUE #16

(Address)

MIAMI, FLORIDA 33174 (305)552-5973

(City, State, Zip)

(Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

800001892518  
-01/30/95--01030--014  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

(904) 385-6735

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

1. NEW MEDICAL CENTER, INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(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	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

Articles of Incorporation  
Of

NEW MEDICAL CENTER, INC.

FILED  
JUN 25 PM 12:31  
TALLAHASSEE, FLORIDA

The undersigned Incorporator(s), for the purpose of forming Corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

Article I, Name

The name of the corporation shall be: New Medical Center, Inc.

Article II, Principal Office

The principal place of business and mailing address of this corporation shall be:

5942 W. 16 Ave.  
Hialeah, Fl. 33012

Article III, Capital Stock

The Number of shares of stock that this corporation is authorized to have outstanding at anytime is:  
Fifty (50) @ \$10.00 par value, having an aggregate value of \$500.00--( Five  
Hundred Dollars and 00/100)-----

Article IV, Initial registered Agent and Address

The name and the address of the Initial registered agent is:

Victor Rivera  
5942 W. 16 Ave.  
Hialeah, Fl. 33012

Article V. Incorporator(s)

The name(s) and street address(es) of the Incorporator(s) to these Articles of Incorporation is (are):

Victor Rivera  
5942 W. 16 Ave.  
Hialeah, Fl. 33012

Article VI. Officers and Directors

The name(s) and street address(es) of the Board of Directors and Officers of this corporation is (are):

Victor Rivera  
5942 W. 16 Ave.  
Hialeah, Fl. 33012

The undersigned has (have) executed these Articles of Incorporation this 12th day of  
January \_\_\_\_\_, 19 95.

  
\_\_\_\_\_  
Signature/Title

\_\_\_\_\_  
Signature/Title

\_\_\_\_\_  
Signature/Title

Certificate of Designation  
Registered Agent/Registered Office

Pursuant to the provision of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office, in the State of Florida.

1. The name of the Corporation is: New Medical Center, Inc.

2. The name and address of the registered agent and office is:

Victor Rivera  
5942 W. 16 Ave.  
Hialeah, FL 33012

Signature \_\_\_\_\_

(Corporate Officer)

Title \_\_\_\_\_

President

Date \_\_\_\_\_

Jan. 12, 1995

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of section 607.325, Florida Statutes.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Jan. 12, 1995

FILED  
65 JUN 25 PM 12:31  
STATE  
TREASURER, FLORIDA

P95000006444

06/23/95 11:17 FAS-T CORPORATE AGENTS

(305) 592-9591

P. 001

2. INQUIRY BY OFFICER/REGISTERED AGENT NAME OFF/RA  
6/22/95 FLORIDA DIVISION OF CORPORATIONS 12:24 AM  
PUBLIC ACCESS SYSTEM  
(((H95000006961))) ELECTRONIC FILING COVER SHEET  
TO: DIVISION OF CORPORATIONS FROM: FAS-T CORP. AGENTS, INC.  
DEPARTMENT OF STATE 8405 NW 33RD ST  
STATE OF FLORIDA SUITE C-100  
405 EAST GAINES STREET MIAMI FL 33166- 301-  
TALLAHASSEE, FL 32399 CONTACT: LIDIA FERNANDEZ  
FAX: (904) 922-4000 PHONE: (305) 599-0839  
FAX: (305) 592-9591  
(((H95000006961))) DOCUMENT TYPE: BASIC AMENDMENT  
NAME: NEW MEDICAL CENTER, INC.  
FAX AUDIT NUMBER: H95000006961 CURRENT STATUS: REQUESTED  
DATE REQUESTED: 06/22/1995 TIME REQUESTED: 12:24:24  
CERTIFIED COPIES: 0 CERTIFICATE OF STATUS: 0  
NUMBER OF PAGES: 2 METHOD OF DELIVERY: FAX  
ESTIMATED CHARGE: \$35.00 ACCOUNT NUMBER: 071001002335

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(((H95000006961)))

\*\* ENTER 'M' FOR MENU. \*\*

6/22/95

FLORIDA DIVISION OF CORPORATIONS  
PUBLIC ACCESS SYSTEM  
ELECTRONIC PROCESSING MENU

12:24 AM

--KEY--

*Copy and off to RA ✓  
Lidia*

65 JUN 23 1995

FILED  
95 JUN 23 PM 2:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06/23/95 11:18

FAS-T CORPORATE AGENTS

(305) 592-9591

P. 002

H95000006961

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF**

NEW MEDICAL CENTER, INC.

(present name)

FILED  
95 JUN 23 PM 2:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:*

**FIRST:** Amendment(s) adopted: *(Indicate article number(s) being amended, added or deleted)*

**ARTICLE V**


The name and address of the officer and director is:

Omar Escalona Pres, Sec, Treas  
5940 West 16th Ave.  
Hialeah, FL 33012

The name and address of the registered agent is:

Omar Escalona  
5940 West 16th Ave.  
Hialeah, FL 33012

Having been named to accept services of process for the above stated corporation at the place designated above, I hereby agree to act in this capacity and I further to the proper and complete performance of my duties

  
\_\_\_\_\_  
Omar Escalona

**SECOND:** If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

Prepared by: Omar Escalona  
5940 West 16th Ave.  
Hialeah, FL 33012  
(305) 827-1333

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THIRD: The date of each amendment's adoption: May 18, 1995

FOURTH: Adoption of Amendment(s) (check one)

- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups.

*The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval by \_\_\_\_\_"  
(voting group)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 22nd day of June, 19 95Signature (By the Chairman or Vice Chairman of the Board of Directors,  
President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

Omar Escalona

Typed or printed name

President

Title

H95000006961