

**P9500019254**

**TRANSMITTAL LETTER**

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

7000001423427  
-03/07/95--01132--008  
\*\*\*\*122.50 \*\*\*\*122.50

SUBJECT: MED TEC EXPO INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check  
for :

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate

\$122.50  
Filing Fee  
& Certified Copy

\$131.25  
Filing Fee,  
Certified Copy  
& Certificate

FROM: KEITH TANNER  
Name (printed or typed)

44 KANTAGREE TRAIL  
Address

OSTEEN, FL 32764  
City, State & Zip

407-322-7000  
Daytime Telephone number

03/07/95-7 PM 1:30

**NOTE: Please provide the original and one copy of the articles.**

# **ARTICLES OF INCORPORATION**

*The undersigned incorporator(s), for the purpose of forming a 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:

MED TEC EXPO INC.

55420-7 PH 1:30  
10/15/1974

## **ARTICLE II PRINCIPAL OFFICE**

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

25 BETHEL LOOP, ENTERPRISE, FL 32738

P.O. BOX 4313, ENTERPRISE, FL 32725

## **ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000

## **ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

KEITH TANNER  
25 BETHEL LOOP  
ENTERPRISE, FL 32738

**ARTICLE V INCORPORATOR(S)**

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

KEITH TANNER  
44 KANTAGREE TRAIL  
OSTEEN, FL 32764

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

6 day of MARCH 19 95 .

Keith Tanner

Signature

Signature

Signature

**Articles of Incorporation  
Filing Fee - \$35**

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS 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: MED TEC EXPO INC.

\_\_\_\_\_

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

KEITH TANNER

\_\_\_\_\_  
(Name)

25 BETHEL LOOP,

\_\_\_\_\_  
(P.O. Box not acceptable)

ENTERPRISE, FL 32738

\_\_\_\_\_  
(City/State/Zip)

*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.*

Keith Tanner  
(Signature)

3-6-95  
(Date)

REC'D - 7 MAR 1 1995  
FLA DIVISION OF CORPORATIONS

**PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.**

**FILED**

96 OCT 17 AM 8:16

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**REINSTATEMENT** 9/17/1996

**FLORIDA DEPARTMENT OF STATE**  
**Sandra B. Martham**  
**Secretary of State**  
**DIVISION OF CORPORATIONS**

**APPLICATION FOR REINSTATEMENT**

**DOCUMENT # P95000019254**

1. Corporation Name  
**MED TEC EXPO INC.**

2. Principal Place of Business  
**25 BETHEL LOOP  
ENTERPRISE FL 32738**

3. Mailing Address  
**P.O. BOX 4018  
ENTERPRISE FL 32738**

4. If above addresses are incorrect in any way, list through incorrect information and enter correction below

5. New Principal Office Address, if Applicable

6. Date Incorporated or Qualified To Do Business in Florida  
**08/07/1985**

7. FEI Number  
**0800001986563**

8. CERTIFICATE OF STATUS DESIRED  
**Applied For**

9. Name and Street Address of Each Officer and/or Director (Florida nonprofit corporations must list up to 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Number)	City / State / Zip
1	Joseph R. Reiss	2061 Kedge Drive	Vienna, VA 22181
2	Judith Reiss	2061 Kedge Drive	Vienna, VA 22181
3	Mark H. Tanner	25 Bethel Loop	Enterprise, Fla. 32738

10. Name and Address of Current Registered Agent  
**TANNER, MARK  
25 BETHEL LOOP  
ENTERPRISE FL 32738**

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes  No

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owned by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate and my signature shall have the same legal effect as if made under oath

**SIGNATURE:** *Mark H. Tanner*

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**10-3-96 407**