

P95000020345

OFFICE USE ONLY (Document #)

Peter Barons  
(Requestor's Name)  
5403 NW 199th Ave  
(Address)  
Miami, FL 33055  
(City, State, Zip) (Phone #)

100000142825.1  
-113/13/95- 01072--0005  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

OFFICE USE ONLY

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

1. Cine Diagnostic, Inc.  
(Corporation Name) (Document #)
  2. \_\_\_\_\_  
(Corporation Name) (Document #)
  3. \_\_\_\_\_  
(Corporation Name) (Document #)
  4. \_\_\_\_\_  
(Corporation Name) (Document #)
- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☒ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status
- McBarons GAVE AUTHORIZATION 3/14/95 BT*

NEW FILINGS	
XX	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

FILED  
MAR 13 11 02 AM '95  
SECRETARY OF STATE  
TALLAHASSEE, FL

3. PEG 17 MAR 17 1995

Examiner's Initials

## TRANSMITTAL LETTER

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

SUBJECT: Cine Diagnostic, 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      ☐ \$78.75      ☐ \$122.50      ☐ \$131.25

FROM: Mr. Eduardo Exposito, Esq.  
Name (printed or typed)

3910 West Flagler Street  
Address

Miami, Florida 33134  
City, State & Zip

305-620-8246  
Daytime Telephone number

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:

Cine Diagnostic, Inc.

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SECRETARY OF STATE  
TALLAHASSEE FL

### ARTICLE II PRINCIPAL OFFICE

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

908 Turner Street  
Clearwater, Florida 34615

### ARTICLE III SHARES

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

3 at \$1.00 per share

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Mr. Eduardo Exposito, Esq.  
3910 West Flagler Street  
Miami, Florida 33134

ARTICLE V INCORPORATOR(S)

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

President - Richard Reichel - 908 Turner Street - Clearwater, Fl 34615

Vice President - Yanet Baez - 16042 N.W. 83 Court - Miami Lakes, Fl 33016

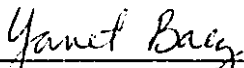
Vice President II - Peter A. Barone - 20604 N.W. 55th Court - Miami, Fl 33055

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

9th day of March, 1995.



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: Cine Diagnostic, Inc.

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

Mr. Eduardo Exposito, Esq.

(Name)

3910 West Flagler Street

(P.O. Box not acceptable)

Miami, Florida 33134

(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.*



(Signature)

Eduardo A. Exposito

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MAR 13 PM 8:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA