

P45000029253

TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA
409 EAST GAINES STREET
TALLAHASSEE, FL 32399
FAX: (904) 922-4000

FROM: EMPIRE CORPORATE KIT COMPANY
1492 W FLAGLER ST
SUITE 200
MIAMI FL 33136- 301-
CONTACT: RAY STORMONT
PHONE: (305) 541-3694
FAX: (305) 541-3770

DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: CASSIA MACHADO HEALING INSTITUTE, INC.
FAX AUDIT NUMBER: H95000004213
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TALLAHASSEE, FLORIDA

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SEP 13 PM 2:43
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
IN FLORIDA

(9)

**ARTICLES OF INCORPORATION
OF**

CASSIA MACHADO HEALING INSTITUTE, INC.

The undersigned, in order to form a corporation for the purpose hereinafter stated, under and pursuant to the General Corporation Act of the State of Florida, do hereby certify as follows.

ARTICLE I

NAME

The name of this corporation is: **CASSIA MACHADO HEALING INSTITUTE, INC.**

ARTICLE II

PURPOSE

The general nature of the business to be transacted by this corporation shall be:

- A) Spiritual Healing;
- B) To purchase, exchange, hire, or otherwise acquire such personal property, chattels, rights, easements, permits, privileges and franchises as may lawfully be purchased, exchanged, hired, or acquired.

**JOHN M. MACDANIEL, P.A.
ONE BISCAYNE TOWER, SUITE 2975
TWO SOUTH BISCAYNE BLVD.
MIAMI, FLORIDA 33131
FLORIDA BAR # 280612
(305) 374-0700**

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C) To erect, construct, maintain, improve, rebuild, enlarge, alter, manage, and control directly or through ownership of stock in any corporation, any and all kinds of buildings, houses, hotels, bungalows, stores, offices, warehouses, mill, shops, factories, machinery and plants, and any and all structures and erections which may at any time necessary, useful, or advantageous in the judgment of the Board of Directors, for the purpose of the Corporation, and which can lawfully be done.

D) To sell, manage, improve, develop, assign, transfer, convey, lease, sublease, pledge or otherwise encumber the lands,

E) To borrow money with or without pledge of or mortgage on all or any of its property, real or personal, as security and to loan and advance money upon mortgages on personal or real property or on either of them.

F) To buy, sell, and deal in, with or without guarantee of payment thereof, bonds and mortgages and other like securities and other kinds of property, whether real or personal, not prohibited or specifically excepted by law, and to do and prosecute any facts or things incidents to or proper in connection with the carrying on of the business of the corporation.

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G) To purchase, acquire, hold, sell, assign, transfer, mortgage, pledge, and otherwise dispose of the shares of capital stock, bonds, debentures, or other evidence of indebtedness of any corporation, domestic or foreign, and while the holder thereof, to exercise all the rights and privileges of ownership, including the right to vote thereon, and to issue in exchange therefor its own

stock, bonds, and other obligations.

H) To purchase or otherwise acquire, undertake, carry on, improve or develop all or any of the business, good will, rights, assets or liabilities of any person, firm, association or corporation carrying on any kind of business the same as or of a similar nature to that which this corporation is authorized to carry on, pursuant to the provisions of these Articles of Incorporation.

I) To all such acts and things as are incident or conducive to the premises.

J) This Corporation shall have the power conduct its business in all its branches in the State of Florida, or in any other State or States or territories of the United States, or in the District of Columbia, and the dependencies of the United States or in foreign countries, and ultimately to do all acts and things and to exercise all the powers now or hereafter authorized by law necessary to carry on the business of said corporation, or to promote any of the subjects or objects for which the corporation is formed.

K) The foregoing enumeration of any or all or a combination of either of the specific powers lettered a) through j) both inclusive, shall not be held to limit or restrict in any manner the general powers of the corporation and therefore, the corporation may engage in any lawful act or activity for which corporations may be organized under the General Corporation Act of the State of Florida.

ARTICLE III

DURATION

This Corporation shall have perpetual existence.

ARTICLE IV

CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to issue at any time is 100 shares, \$1.00 par value.

All the aforementioned stock is to be issued as fully paid for and exempt from assessment.

The capital stock may be paid for in money, property, labor or services actually performed for the corporation, at just valuation to be fixed by the stockholders or by the Directors at a meeting called for such purposes.

ARTICLE V

REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is *One Biscayne Tower, Suite 2975, Two South Biscayne Boulevard, Miami, Florida 33131* and the name of the initial registered agent of this corporation at that address is *John M. MacDaniel, Esquire.*

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ARTICLE VI

BOARD OF DIRECTORS

This corporation shall have NO Director initially. The number of directors may either increased or diminished from time to time by the By-Laws, but shall never be less than one.

ARTICLE VII

OFFICERS

The Corporation shall have a President, and may also have one or more additional Vice-Presidents, Assistant Secretaries, and Assistant Treasurers, and such other officers and agents as may deemed necessary.

All other officers and agents shall be chosen in such a manner, hold their offices for such terms and have such powers and duties as may be prescribed by the By-Laws. The same person may hold two or more offices.

ARTICLE VIII

INCORPORATOR

The name and address of the person signing these articles is:

JOHN M. MACDANIEL, P.A.
One Biscayne Tower Suite 2975
Two South Biscayne Blvd.
Miami, Florida 33131

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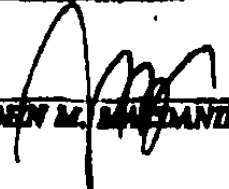
**ARTICLE IX
AMENDMENTS**

The Corporation reserves the right to amend, alter, change, or repeal any provisions contained in these Articles of Incorporation in the manner now or hereafter prescribed by the Statutes, and all rights conferred upon stockholders herein are granted subject to this reservation.

**ARTICLE X
PRINCIPAL OFFICE**

At present, the principal office of the corporation is: **121 S.E. 1st Street - Suite 800, Miami, Florida 33131.**

IN WITNESS WHEREOF, the undersigned incorporator, has executed these Articles of Incorporation this 13TH day of April, 1995,


JOHN M. MAGDANT

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STATE OF FLORIDA)
COUNTY OF DADK)

Before me, a Notary Public duly authorized to take acknowledgments in the state and county set forth above, personally appeared **JOHN M. MACDANIRI**, before me and known by me to be the person who executed the foregoing articles of incorporation and he acknowledged before me that he executed those articles of incorporation.

IN WITNESS WHEREOF I have hereunto set my hand and affixed my official seal, in the state and county aforesaid, on this 14TH day of April, 1995.

[Signature]
NOTARY PUBLIC, State of Florida

My Commission Expires:



RUF1 CORREA
My Commission DC500000
Expires Aug. 01, 1997
Divided by AMS
800-888-1478

Personally Known ☒ OR Produced Identification _____
Type of Identification Produced _____

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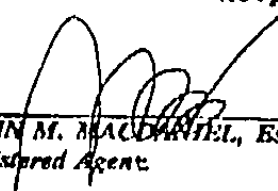
CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICES OF PROCESS WITHIN THIS STATE AND MANAGING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 48.001, Florida Statutes, the following is submitted in compliance with said Act:

First that: CASSIA MACHADO HEALING INSTITUTE INC. desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Incorporation at the county of DADY, State of Florida, has named John M. MacDaniel, Esquire, located at One Biscayne Tower, Suite 2975, Two South Biscayne Boulevard, Miami, Florida, as its Registered Agent to accept service or process within this State.

ACKNOWLEDGEMENT:

Having been named to accept services of process for the above stated corporation, at the place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provisions of said Act relative to keeping open said office.


JOHN M. MACDANIEL, Esquire
Registered Agent

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JUL 13 PM 2:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO THIS STATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000029253 (8)**

CASSIA MACHADO HEALING INSTITUTE, INC.

FILED

96 OCT 10 AM 10:23

SECRETARY OF STATE



Principal Place of Business: **ONE BISCAYNE TOWER
SUITE 2975, TWO SOUTH BISCAYNE BLVD
MIAMI FL 33131**

Mailing Address: **ONE BISCAYNE TOWER
SUITE 2975, TWO SOUTH BISCAYNE BLVD
MIAMI FL 33131**

| | |
|--|--|
| 3. Date Incorporated or Qualified 04/13/1995 | 3a. Date of Last Report |
| 4. FED Number 65-0975045 | <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Report Filed Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 7. This corporation has liability for intangible tax under s. 109.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |

| | |
|--------------------------------|------------------------|
| 2. Principal Place of Business | 2a. Mailing Address |
| 21. Suite, Apt. # etc. | 21. Suite, Apt. # etc. |
| 22. City & State | 22. City & State |
| 23. Zip | 23. Zip |
| 24. Country | 24. Country |

9. Name and Address of Current Registered Agent
**MACDANIEL, JOHN M
ONE BISCAYNE TOWER, SUITE 2975
TWO SOUTH BISCAYNE BLVD.
MIAMI FL 33131**

10. Name and Address of New Registered Agent
81. Name **CASSIA MACHADO**
82. Street Address (P.O. Box Number is Not Acceptable)
803 SOUTH BAYSHORE DR.
83. **THE FOUR AMBASSADOR**
84. City **MIAMI** FL 85. Zip Code **33131**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, to the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0508, Florida Statutes.

SIGNATURE *[Signature]* *[Signature]* **09/12/96**

| 12. OFFICERS AND DIRECTORS | |
|----------------------------|---|
| TITLE | CASSIA MACHADO HEALING <input type="checkbox"/> DELETE |
| NAME | INSTITUTE INC |
| STREET ADDRESS | CASSIA MARIA MACHADO |
| CITY-ST-ZIP | 131 SE. 1ST SUITE 803 MIAMI FL 33131 |
| TITLE | <input type="checkbox"/> DELETE |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE |
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| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|
| 11 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12 NAME | 800001987318--3 |
| 13 STREET ADDRESS | -10/28/96-01053--014 |
| 14 CITY-ST-ZIP | ***225.00 ***225.00 |
| 21 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 22 NAME | |
| 23 STREET ADDRESS | |
| 24 CITY-ST-ZIP | |
| 31 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 32 NAME | |
| 33 STREET ADDRESS | |
| 34 CITY-ST-ZIP | |
| 41 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 42 NAME | |
| 43 STREET ADDRESS | |
| 44 CITY-ST-ZIP | |
| 51 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 52 NAME | |
| 53 STREET ADDRESS | |
| 54 CITY-ST-ZIP | |
| 61 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 62 NAME | |
| 63 STREET ADDRESS | |
| 64 CITY-ST-ZIP | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* *[Signature]* **07.31.96** **305**
09 12 96 **3796423**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
GLENIA MARIA MACHADO

CR2E034 (3-96)