

P95000072637

LAZARUS CORPORATE INDUSTRIES, INC.
(Requestor's Name)

890 S.W. 87 AVENUE, SUITE: 16
(Address)

MIAMI, FLORIDA 33174 (305)552-5973
(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

(904)385-6715

700001589177
-09/20/95--01030--015
****122.50 ****122.50

OFFICE USE ONLY

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

1. SHADDAI MEDICAL SUPPLIES, 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

9/20/95

3
STATE OF FLORIDA
COUNTY OF MIAMI

93 SEP 22 PM 12:07

ARTICLES OF INCORPORATION

OF

SHADDAI MEDICAL SUPPLIES, INC.

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I

NAME

The name of the corporation shall be:

SHADDAI MEDICAL SUPPLIES, INC.

ARTICLE II

PRINCIPAL OFFICE

The principal place of business of said corporation shall be at: 12360 SW 132ND COURT SUITE #113
MIAMI FL 33186

whit the privilege of having branch offices at other places within or without the State of Florida.

ARTICLE III

CAPITAL STOCK

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

ONE HUNDRED Shares

Articles of Incorporation

ARTICLE IV

INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

ANGEL P. FERNANDEZ
780 NW 42ND AVE STE#319
MIAMI FL 33126-5536

ARTICLE V

INCORPORATOR

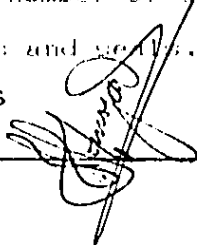
The name and street address of the incorporator to these
Articles of Incorporation is:

NAME	ADDRESS
NADIOUSKA DELGADO-PRESIDENT	21157 PERMIT LANE MIAMI FL 33189

Articles of Incorporation

IN WITNESS WHEREOF, WE, the undersigned, being each of the original subscribers to the capital stock hereinabove named, for the purpose of forming a corporation to do business both within and without the State of Florida, under the laws of Florida, do make and file these Articles, hereby declaring and certifying that the facts herein stated are true, and do respectfully agree to take the number of shares hereinabove set forth, and hereunto set our hands and seals, this the 11th day of September, 1995

WITNESSES



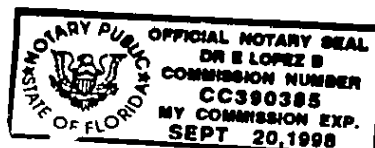

NADIUSKA DELGADO
PRESIDENT

STATE OF FLORIDA)
) SS:
COUNTY OF DADE)

BEFORE ME, the undersigned authority, personally appeared NADIUSKA DELGADO who is known to me to be the person described in and who executed the foregoing Articles of Incorporation and who, after being by me first duly sworn, on oath, depose and say and do acknowledge before me, that the said Articles to be the act and deed of the signers respectively and the facts and matters therein set forth are true and correct.



Notary Public



95 SEP 29 PM 12:37

CERTIFICATE DESIGNATING RESIDENT AGENT

Pursuant to the provisions of section 602.0501, 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:
SHADDAI MEDICAL SUPPLIES, INC.
2. The name and address of the registered agent and office is:
**ANGEL P. FERNANDEZ
780 NW 42ND AVE STE#319
MIAMI FL 33126-5536**

Naduska Delgado
Corp. Officer: **NADUSKA DELGADO**
PRESIDENT

Date: September 11, 1995

Having been named to accept service of process for the above stated corporation at 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.

Angel P. Fernandez
ANGEL P. FERNANDEZ

Date: September 11, 1995

STATE OF FLORIDA)
) SS:
COUNTY OF DADE)

I HEREBY CERTIFY that on this day before me, a Notary Public duly authorized in the State and County above-named to take acknowledgements, personally appeared **ANGEL P. FERNANDEZ** to me known to be the person described as the Resident Agent, and who executed the foregoing Certificate and acknowledged before me that he executed the foregoing Certificate Designating Resident Agent. **IN WITNESS WHEREOF**, I set my hand and official seal in the County and State named above, this 11th day of September, 1995

D. Lopez
Notary Public
State of Florida

My commission expires:

