

P95000072651

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

OFFICE USE ONLY

08/20/95 08:00:00
08/20/95 08:00:00
****122.50 ****122.50

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

1. INTER MED LAB CORP.
(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

789-502-672
W95-17443

Examiner's Initials

g
9/20/95



FLORIDA DEPARTMENT OF STATE

Sandra B. Northam
Secretary of State

RECEIVED
SECRETARY OF STATE
AUG 30 1995
TALLAHASSEE, FLORIDA

August 29, 1995

LAZARUS CORPORATE INDUSTRIES, INC.
890 SW 87 AVENUE #16
MIAMI, FL 33174

SUBJECT: INTER MED LAB CORP.
Ref. Number: W95000017443

We have received your document for INTER MED LAB CORP. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved entity. The name of a voluntarily dissolved Florida entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved entity provides the Department of State with a notarized affidavit, executed pursuant to section 607.0120 or 608.408, Florida Statutes, permitting the immediate assumption or use of the name by another entity.

If the document is resubmitted, please return a copy of this letter to ensure your document is properly handled.

If you have any further questions regarding the availability of a particular name, please call (904) 488-9000.

If you have any questions concerning the filing of your document, please call (904) 487-6973.

Claretha Golden
Document Specialist

Letter Number: 995A00040278

AFFIDAVIT

FILED
CLERK OF STATE
RECORDS
95 SEP 20 PM 12:06

STATE OF FLORIDA)
 ss.:
COUNTY OF DADE)

BEFORE ME, the undersigned authority, on this day personally appeared **MARTHA LIMA, as President and LUIS A. LIMA, as Secretary of INTER MED LAB, INC.**, known to me to be the persons who subscribed their names below, who after having first been duly sworn by me, on oath depose and say:

1. That affiants are former directors of **INTER MED LAB, INC.**
2. That on August 18, 1995, an Article of Dissolution of **INTER MED LAB, INC.**, was filed with the Office of the Secretary of State.
3. That the President, **MARTHA LIMA** and Secretary, **LUIS A. LIMA**, have no intentions of revoking said Articles of Dissolution of **INTER MED LAB, INC.**
4. That affiants further state that **PERLA O. ESPINOSA**, has the right to use the name of **INTER MED LAB CORP.**, by filing Articles of Incorporation.



MARTHA LIMA, Affiant



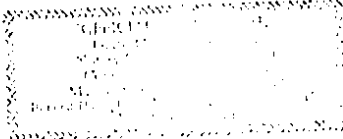
LUIS A. LIMA, Affiant

SWORN TO AND SUBSCRIBED before me this 15th day of SEPTEMBER, 1995, by **MARTHA LIMA** and **LUIS A. LIMA**, who produced Personally known as identification.



Notary Public, State of Florida
GASTON R. ALVAREZ
Print Notary Signature

My Commission Expires:



ARTICLES OF INCORPORATION
OF
INTER MED LAB CORP.

STATE
OF FLORIDA
95 SEP 29 11:12:36

ARTICLE I - NAME

The name of this corporation is INTER MED LAB CORP.

ARTICLE II - DURATION

This corporation shall have perpetual existence, unless sooner dissolved in accordance with the laws of the State of Florida.

ARTICLE III - ADDRESS

The mailing address of the corporation is 1750 West 56 Street, Apt. 117, Hialeah, Florida 33012.

ARTICLE IV - PURPOSE

This corporation is organized for the purpose of transacting any and all business permitted under the laws of the United States and of the State of Florida.

ARTICLE V - CAPITAL STOCK

This corporation is authorized to issue One Hundred (100) shares of NO par value common stock, which shall be designated "Common Stock".

ARTICLE VI- PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VII - INITIAL REGISTERED OFFICE AND AGENT

The street address of the principal office of this corporation is 1750 West 56 Street, Apt. 117, Hialeah, Florida 33012 and the name of the initial registered agent of this corporation is PERLA O. ESPINOSA.

ARTICLE VIII - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO directors initially. The number of directors may be either increased or diminished from time to time as provided in the bylaws but shall never be less than ONE.

The names and addresses of the initial directors of this corporation are:

PERLA O. ESPINOSA	1750 West 56 Street, #117 Hialeah, Florida 33012
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ARTICLE IX - INDEMNIFICATION

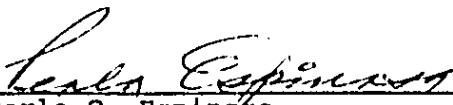
The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE X - INCORPORATOR

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

PERLA O. ESPINOSA	1750 West 56 Street, #117 Hialeah, Florida 33012
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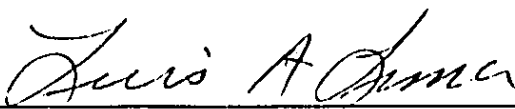
IN WITNESS WHEREOF, the undersigned subscribers have executed these articles of incorporation this 22 day of August, 1995.


Perla O. Espinosa

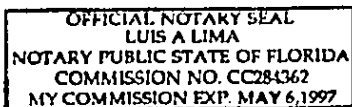
STATE OF FLORIDA)
: ss
COUNTY OF DADE)

Before me, a notary public authorized to take acknowledgments in the state and county set forth above, personally appeared PERLA O. ESPINOSA, known to me and known by me to be the person who executed the foregoing articles of incorporation, and she 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, this 22 of August, 1995.


Notary Public, State of Florida at Large

My commission expires:



CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA, NAMING AGENT UPON
WHOM SERVICE OF PROCESS MAY BE EFFECTIVE

In compliance with Section 607.0501 of the Florida
Statutes, the following is submitted:


INTER MED LAB CORP.

desiring to organize or qualify under the laws of the State of
Florida, with its principal place of business in the City of
Hialeah, County of Dade, State of Florida, has named PERLA O.
ESPINOSA, located at 1750 West 56 Street, #117, City of Hialeah,
County of Dade, State of Florida 33012 as its agent to accept
service of process within the State of Florida.

ACKNOWLEDGMENT

Having been named to accept service of process for the
above stated corporation, at the place designated in this
Certificate, I hereby agree 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.

Dated this 22 day of August, 1995.


Perla O. Espinosa
Resident and Registered Agent