

996000005648

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)305-6715

OFFICE USE ONLY

900001692059
01/18/96--01059--004
*****78.75 *****78.75

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

1. THERAPY PLUS MEDICAL CENTER 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

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96 JAN 18 AM 11:26
DIVISION OF CORPORATION

Examiner's Initials

gf

1/18/96

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 JUL 18 PM 2:55

ARTICLES OF INCORPORATION

ARTICLE I. NAME

The name of this Corporation is THERAPY PLUS MEDICAL CENTER, INC.

ARTICLE II. NATURE OF BUSINESS

THERAPY PLUS MEDICAL CENTER, INC. is organized for the purpose of transacting any lawful business for which corporations may be formed in Florida.

ARTICLE III. TERM OF EXISTENCE

The duration of THERAPY PLUS MEDICAL CENTER, INC. is perpetual.

ARTICLE IV. CAPITAL STOCK

THERAPY PLUS MEDICAL CENTER, INC. is authorized to issued 100 shares of common stock, par value \$1.00 per share.

ARTICLE V. ADDRESS

The Principle address and the initial registered office of THERAPY PLUS MEDICAL CENTER, INC. is:

1405 SW 107th AVE
MIAMI, FL 33174

and the name of the initial registered agent of this corporation at this address is CRAIG SANFORD.

ARTICLES VI. INITIAL DIRECTORS

THERAPY PLUS MEDICAL CENTER, INC. shall have one (1) director, and the number of directors may be changed as provided in the bylaws, but shall never be less than one. The name and address of the initial directors are:

CRAIG SANFORD
1405 SW 107th AVE
MIAMI, FL 33174

PRESIDENT
DIRECTOR


ARTICLE VII. INCORPORATORS

The name and addresses of the incorporator of this corporation are:

CRAIG SANFORD
1405 SW 107th AVE
MIAMI, FL 33175

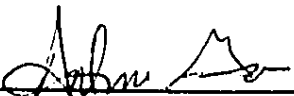
IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation this 10th day of January 1996.

STATE OF FLORIDA)
COUNTY OF DADE)


CRAIG SANFORD
INCORPORATOR

Before me, a notary public authorized take acknowledgements in the State and County seats above, personally appeared CRAIG SANFORD, known to me and known by me to be the person(s) who executed the foregoing Articles of Incorporation, and they acknowledged before me that they 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 10th day of January 1996.


NOTARY PUBLIC
STATE OF FLORIDA AT LARGE

My Commission Expires:



ANTONIO GARCIA
My Comm Exp. 1/09/99
Bonded By Service Ins
No. CC420891

☒ Personally Known ☐ Not Known

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 JAN 13 11 21 55

ACCEPTANCE OF APPOINTMENT

OF

REGISTERED AGENT

Pursuant to the provisions of section 607.0501, 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: THERAPY PLUS MEDICAL CENTER, INC.

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

CRAIG SANFORD
1405 SW 107th AVE
MIAMI, FL 33174

SIGNATURE 

TITLE PRESIDENT

DATE January 10, 1996

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 

DATE January 10, 1996

P96000005648

HAZARDUS CONCRETE INDUSTRIES, INC.
Requestor's Name

890 S.W. 87 AVENUE SUITE 110
Address

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

LOCAL REPRESENTATIVE TALLAHASSEE

Office Use Only

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

1. Therapy Plus Medical Center, Inc.
(Corporation Name) (Document #)

2. Therapy Plus Medical Center, Inc.
(Corporation Name) (Document #)

3. Therapy Plus Medical Center, Inc.
(Corporation Name) (Document #)

4. Therapy Plus Medical Center, Inc.
(Corporation Name) (Document #)

FILED
AUG 29 PM 2:49
DIVISION OF CORPORATION
FLORIDA

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*****35.00 *****35.00

☒ Walk in

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<input type="checkbox"/>	Other

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DIVISION OF CORPORATION

AMENDMENTS TO THE ARTICLES OF INCORPORATION

OF

THERAPY PLUS MEDICAL CENTER, INC.

I, the undersigned, being the Secretary of Therapy Plus Medical Center, Inc., a Florida corporation, do hereby amend its Articles of Incorporation as follows:

ARTICLE I

Effective August 26, 1996, the name of the corporation shall be changed from:

Therapy Plus Medical Center, Inc.

To

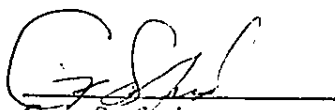
Totally Automated Business Strategies, Inc.

The date of adoption was August 26, 1996.

The number of votes cast for the amendment by shareholders was sufficient for approval.

In all other respects, the Articles of Incorporation shall remain unchanged.

IN WITNESS WHEREOF, I have hereunto set my hand and seal in Miami, Florida, this 26th day of August 1996.


Craig Sanford
Secretary


Notary Public



ANTONIO GARCIA
My Comm Exp. 1/09/99
Bonded By Service Ins
No. CC420891
Personally Known [] Other []

STATE OF FLORIDA)
) SS:
COUNTY OF DADE)

BEFORE ME, personally appeared Craig Sanford known to me to be the Secretary of Therapy Plus Medical Center, Inc., a Florida corporation, whom, after being duly sworn, acknowledged to me that he executed the foregoing Articles of Amendment to the Articles of Incorporation in his capacity as Secretary of the corporation and that the same in freely and voluntarily for the purpose herein stated.

WITNESS my hand and official seal in Miami, Dade County, Florida, this 26th day of August 1996.



Craig Sanford



NOTARY PUBLIC

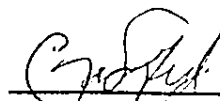


ANTONIO GARCIA
My Comm Exp. 1/09/99
Bonded By Service Ins
No. CC420891

☒ Personally Known ☐ Other I.D.

The undersigned, being the stockholder and director of Therapy Plus Medical Center, Inc., a Florida corporation, acting pursuant to Section 607, 134, 607, 181 (3) and 607, 394 of the Florida Statute, do hereby manifest his intention that the foregoing Articles of Amendment to Articles of Incorporation be Adopted according to its terms.

WITNESS my hand and official seal of Miami, Dade County, Florida, this 26th day of August 1996.



STOCKHOLDER AND DIRECTOR