

**P910000014302**

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

000001715840  
-02/15/96--01069--006  
\*\*\*\*122.50 \*\*\*\*122.50

Office Use Only

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

1. APEX X-RAY SERVICES, 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

RECEIVED  
 96 FEB 15 AM 11:24  
 DIVISION OF CORPORATION

Examiner's Initials g2/15/96

# ARTICLES OF INCORPORATION

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
96 FEB 15 PM 2:44

*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:

APEX X-RAY SERVICES, INC

## ARTICLE II PRINCIPAL OFFICE

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

5600 S.W. 135AVE. SUITE 214B  
MIAMI, FL. 33183

## ARTICLE III SHARES

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

100

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Betty Pounce  
5600 S.W. 135AVE suite:  
MIAMI, FL. 33183 214B

**ARTICLE V INCORPORATOR(S)**


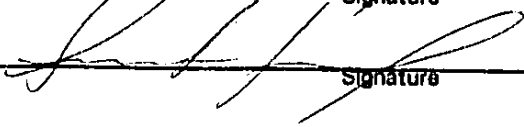
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Bobby Ponce President 50%  
5600 S.W. 135 Ave. Suite 214B SHARES  
Miami, FL 33183

Sandra Gonzalez Vice President 50%  
5600 S.W. 135 Ave. Suite 214B SHARES  
Miami, FL 33183

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

FEBRUARY day of 14, 1996.

  
\_\_\_\_\_  
Signature  
  
\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Signature

**Articles of Incorporation  
Filing Fee - \$35**

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

96 FEB 15 PM 2:45

Pursuant to the provisions of sections 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: Apex X-Ray Services, Inc.

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

Betty Ponce  
(NAME)

5600 S.W. 135 Ave. Suite 214  
(P.O. BOX NOT ACCEPTABLE)

Orlando, FL 32833  
(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 Betty Ponce

DATE 2/14/96

REGISTERED AGENT FILING FEE: \$35.00