

P96000021816

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

RECEIVED 12/22/94
-03/13/96--01/20/00
****122.50 ****122.50

Office Use Only

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

1. NEW TECH 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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-03/13/96--01/20/00
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ARTICLES OF INCORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 MAR 11 PM 2:56

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:

NEW TECH MEDICAL CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

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

1918 S.W. 57 AVE MIAMI, FL 33155

ARTICLE III SHARES

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*ZEYRA C. LEZCANO
6940 S.W. 89 CT
MIAMI, FL 33173*

ARTICLE V INCORPORATOR(S)

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

ZEHRA C. LEZCANO
6940 S.W. 89 CT
MIAMI, FL 33173

ARTICLE VI DIRECTOR(S)

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

MOISES J. DOBARGANES
10325 SW 41 terr MIAMI, FL 33165
ZEHRA C. LEZCANO
6940 SW 89 CT MIAMI, FL 33173
LUCRECIA C. SKUPIN
470 S. SHORE DR MIAMI BEACH, FL 33141
LUIS E. COUCEIRO
452 N.E. 89 ST MIAMI, FL 33148

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

_____ 8th day of MARCH, 19 26.



Signature

Signature

Signature

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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 MAR 11 PM 2:56**

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: _____

NEW TECH MEDICAL CENTER, INC.

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

ZEFRA C. LEZCANO

(NAME)

6940 SW 89 CT MIAMI, FL 33173

(P.O. BOX NOT ACCEPTABLE)

(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

Zefra C. Lezcano

DATE

3-8-94

P96000021816

NEW TECH MEDICAL CENTER
1918-16 S.W. 37 AVENUE
MIAMI, FLORIDA 33155
OFFICE: (305) 262-6900 FAX: (305) 262-7668
262-6900

9-5-96

TO: STEVE HARRIS,

800001982698--3
-10/22/96--01069--001
*****87.50 *****87.50

HERE ARE THE NEW PAPERS ON THE
AMENDMENTS TO THE CORPORATION. THE FEE
HAD ALREADY BEEN RECEIVED. I DID NOT
RECEIVE THE CHANGE REQUEST BECAUSE IT WAS
SENT TO THE OLD PRESIDENT'S ADDRESS. PLEASE
PUT THIS IN THE RECORDS A.S.A.P SO THAT I
CAN OPEN MY BANK ACCOUNT. IF YOU HAVE ANY
QUESTIONS DON'T HESITATE TO CALL ME AT (305) 262-6900.

Thank 2/04,



L. COUCEIRO

SH 10/16

FILED
96 OCT 14 AM 9:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

September 9, 1996

New Tech Medical Center
1918-16 S.W. 57th Ave.
Miami, FL 33155

SUBJECT: NEW TECH MEDICAL CENTER, INC.
Ref. Number: P96000021816

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

The fee to file articles of amendment is \$35. For each certified copy requested, please add an additional \$52.50.

Please provide the name and a street address for the new registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6908.

Steven Harris
Corporate Specialist

Letter Number: 196A00041944

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96 OCT 14 AM 9:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF

NEW TECH MEDICAL CENTER, INC.

(present name)

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)

ARTICLE VI DIRECTORS:

THE NAMES AND STREET ADDRESSES OF THE DIRECTOR OF THE ARTICLES OF INCORPORATION ARE:

LUIS E. CONCEIRO PRES/V.P./SECRETARY/TREASURER/REGISTERED AGENT
1918 S.W. 57 ave MIAMI, FL 33155
(305) 262-6900

THE MAILING ADDRESS FOR THE REGISTERED AGENT IS
P.O. BOX 557189 MIAMI, FL 33255-7189.

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

N/A

NOTICE AND MINUTES OF ANNUAL MEETING OF SHAREHOLDERS OF

NEW TECH MEDICAL CENTER, INC.

THE ANNUAL MEETING OF SHAREHOLDERS OF THE ABOVE NAMED CORPORATION WAS CALLED TO ORDER ON 09-04-96 at 12:00 pm BY THE PRESIDENT/ V.P./ SECRETARY/TREASURER LUIS E. COUCEIRO.

THE SECRETARY, LUIS E. COUCEIRO, THEN CALLED THE ROLL, USING THE SHAREHOLDERS LISTS COMPILED FOR THE ABOVE NAMED CORP. ALL SHAREHOLDERS WERE IN ATTENDANCE AT THE MEETING.

THE PURPOSE OF THE MEETING IS TO DIVIDE THE STOCKS FORMALLY. THERE ARE 100 SHARES OF COMMON STOCK. THEY WILL BE DIVIDED AS FOLLOWS:

LUIS E. COUCEIRO PRESIDENT/V.P./SECRETARY/TREASURER HAS the total 100 (one hundred) shares of common stock.

EVERY ONE ELSE THAT USED TO BE IN THE CORPORATION RESIGNED.

THIS HAS BEEN APPROVED BY THE PRESIDENT & VICE-PRESIDENT.




LUIS E. COUCEIRO PRES.



LUIS E. COUCEIRO V.P.

9-5-96
DATE

9-5-96
DATE



OLD INCORPORATOR AND REGISTERED AGENT SIGNATURE
BY SIGNING ABOVE I AM IN COMPLIANCE WITH THE CHANGE.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THIRD: The date of each amendment's adoption: 06-12-96

FOURTH: Adoption of Amendment(s) (check one)

☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting.

The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval by _____
(voting group)"

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 5th day of SEPTEMBER, 19 96

Signature X

(By the Chairman or Vice Chairman of the Board of Directors,
President or other officer adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

LUIS E. COUCEIRO

Typed or printed name

PRESIDENT/V.P. SECRETARY

Title

FILED
96 OCT 14 AM 9:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE
OF PROCESS FOR THE STATED CORPORATION AT THE PLACE DESIGNATED
IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGIS-
TERED AGENT AND AGENT TO ACT IN THIS CAPACITY

X

9-5-96

DATE