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| NEW FILINGS | AMENDMEN | rs | |
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| NonProfit | Resignation of R.A. | , Officer/ Director | |
| Limited Liability | Change of Registere | ed Agent | |
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| Annual Report | REGISTRA MQUALIFICA | TION | |
| Fictitious Name | Foreign | | |
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Examiner's Initials



April 12, 1996

LAZARUS CORPORATE INDUSTRIES, INC. 890 SW 87 AVE., STE. 16 MIAMI, FL 33174

SUBJECT: PHARMA-NAT, INC. Ref. Number: W96000007988

We have received your document for PHARMA-NAT, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

THE PERSON DESIGNATED AS SUBSCRIBER/INCORPORATOR IN THE DOCUMENT AND THE PERSON EXECUTING THE DOCUMENT MUST BE THE SAME..

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) 487-6052.

Sandy Ng Document Specialist

Letter Number: 596A00016952

ARTICLES OF INCORPORATION

OF

PHARMA-NAT, INC.

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

PHARMA-NAT, INC.

The principal address of this corporation shall be:

P.O. BOX 523918 MIAMI, FL 33152-3918

FILED SECRETATION STATE TALLANDO TO STATE

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities for business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock have a par value of \$1.00 per share.

ARTICLE IV. ADDRESS

The street address of the initial registered office of the corporation shall be 9725 N.W. 27th Terr. Miami, Fl. 33172and the name of the initial registered agent of the corporation at that address MANUEL ROMERO.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. SPECIAL PROVISION

This corporation shall have officer(s) and Director(s), initially. The name and street address of the initial officer(s) and director(s) who shall hold office for the first year of the corporation, of until his successor is elected or appointed are/is:

VICENTE RODRIGUEZ

PRESIDENT

MANUEL ROMERO

VICE PRESIDENT/REGISTERED AGENT

ARTICLE VII. SUBSCRIBER

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

MANUEL ROMERO 3232 N.W. 7 STREET MIAMI, FL 33125

In WITNESS WHEREOF, the undersigned has hereunto set her hand and seal on this <u>/O</u> day of *APRIL 1996*.



_ (SEAL)

State of Florida

County of Dade

The foregoing instrument was acknowledged before me this $\angle Q$ day of APRIL 1996, by

Notary Public, State of Florida at Large

My Commission Expires _

DERTA C. MODRIGUEZ
MY COMMISSION # CC 491199
EXPIRES: December 17, 1998
Bonded Thru Notary Public Underwriters

Certificate designated place of business or domicile for the service of process within Florida, naming agent upon whom process may be derved In compliance with mection 48.091, Florida Statuten, the following is submitted: First that PHARMA-NAT, INC. (Name of Corporation) Desiring to organize or qualify under the laws of the State of Florida, with its principle place of business at city of MIAMI (City) State of <u>FLORIDA</u>, has named <u>MANUEL ROMERO</u> (State) (Name of resident agent) 9725 N.W. 27th Terr. Miami, F1. 33172 Located at (Street address and number of building) (Post office box addresses ARE NOT acceptable) City of MIAMI, State of Florida, as its agent to accept (City) services of process within Florida. SIGNATURE (Corporate off

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

SIGNATURE

שדעם

TITLE

DATE

(Resident agent

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

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: | |
|----------------------|--|-------------|
| | PHARMA-NAT, INC. | |
| 2. | The name and address of the registered agent and off | fice is: |
| | MANUEL ROMERO | |
| | (Name) | (|
| | 9725 N.W. 27th Terr. Miami, F1. 33172 | 96 SECF |
| | (P.O. BOX NOT ACCEPTABLE) | 超 3 7 |
| | MIAMI, FL 33125 | |
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| pro | ving been named as registered agent and to accept ocess for the above stated corporation at the place des is certificate, I hereby accept the appointment as | sionated in |
| age | ant and agree to act in this chiacity. Further agree | to comply |
| W J, T | th the provisions of all statutes relating to the mplete performance of my duties, and I am familian | proper and |
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