

P96000045421

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

100001842551  
-05/29/96--01099--021  
\*\*\*122.50 \*\*\*122.50  
Office Use Only

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

1. ABDON MEDICAL SUPPLIES, 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

TALLAHASSEE, FLORIDA  
MAY 29 PM 1:40

NEW FILINGS	
<input 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

SN MAY 29 1996

RECEIVED  
96 MAY 29 AM 10:42  
DIVISION OF CORPORATION

Examiner's Initials

**MAY 28, 1996**

Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl 32314

EFFECTIVE DATE  
*May 28, 96*

FILED  
MAY 29 PM 1:40  
TALLAHASSEE, FLORIDA

Re: **ABDON MEDICAL SUPPLIES, CORP.**

ARTICLES OF INCORPORATION  
Principal Office  
1840 W 49th STREET  
SUITE 220-3  
HIALEAH, FL 33012

The undersigned, in order to form a corporation for the purposes hereinafter stated, by and under the provisions of the statutes of the State of Florida, do hereby subscribe to these articles of Incorporation.

Articles I - NAME

The name of this corporation is

**ABDON MEDICAL SUPPLIES, CORP.**

ARTICLES II - DURATION

This corporation shall have perpetual existence. The corporation existence commences at the date of the execution **28TH** day of **MAY, 1996**

ARTICLES III - PURPOSE

This corporation is organized for the following purposes:

- a) Of transacting any or all business permitted under the laws of the United States of America and the laws of the State of Florida.
- b) To Purchase, sell, lease, operate, own, hold, transfer, convey, mortgage, or otherwise encumber, trade, exchange and generally deal in real

estate and personal property of every kind, nature and description wheresoever property located, both tangible and intangible and including chooses in action, either as owner, broker, agent, or factor.

c) In the purchase or acquisition of property, business right of franchise, or for additional working capital, or for any other objective on or about its business affair and without limit as to amount, to incur debts and to raise, borrow and secure the payment of money in any lawful manner, including the issues and sale or other DISPOSITION of bonus, evidence of indebtedness, whether secured by mortgage pledge, deed of trust or otherwise. The corporation might issue its stock for any lawful purpose, including the acquisition of any other entity.

d) To engage in any or all lawful activity and to : institute , participate in and promote and commercial, mercantile, financial and industrial enterprise and operations, and for the purpose of transacting any or all lawful business.

#### ARTICLE IV - POWER

This corporation is authorized to issue 500 shares of \$ 1.00 each common stock which shall be designated "Common Shares".

#### ARTICLE V - PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation shall have the right to purchase his prorata share thereof (as nearly as may be done without issuance of traction shares) at the price asst. which it is offered to others.

ARTICLES VII - INITIAL REGISTERED OFFICE AND AGENT  
**DAMIAN HURTADO    1840 W 49TH STREET**  
**Ste # 220-3**  
**HIALEAH, FL 33012**

#### ARTICLES VIII - INITIAL BOARD OF DIRECTORS

This corporation shall have 1 director (s) initially. The numbers of director (s) may be either increased or diminished from time to time by the laws . The names and addresses of the initial director(s) of this corporation

until the first annual meeting of shareholders or until their successors are elected and qualify (is).

NAME  
DAMIAN HURTADO

ADDRESS  
1840 W 49TH STREET  
SUITE 220-3  
HIALEAH, FL 33016

#### ARTICLE IX - INCORPORATOR

The name (s) and address (es) of the person (s) signing these articles (is) are:

NAME  
DAMIAN HURTADO  
100% Shares

ADDRESS  
1840 W 49TH STREET  
SUITE 220-3  
HIALEAH, FL 33012

Signature   
(INCORPORATOR)  
Title President

Date MAY 28TH, 1996

#### ARTICLES X - AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these articles of incorporation, or at any amendment hereto, and any rights conferred upon the shareholders is SUBJECT to this reservation.

The name and address of the INCORPORATOR is:

NAME  
DAMIAN HURTADO

ADDRESS  
1840 W 49TH STREET  
SUITE 220-3  
HIALEAH, FL 33012

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

Pursuant to the provisions of section 607.0501, Florida Statute, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement designating the registered office/ registered agent, in the state of Florida.

1. The name of the corporation is: **ABDON MEDICAL SUPPLIES, CORP.**

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

Name: **DAMIAN HURTADO**  
Address: **1840 W 49TH STREET  
SUITE 220-3  
HIALEAH, FL. 33012**

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE FOREGOING ARTICLES OF INCORPORATION, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATED TO THE PROPER AND COMPLETE PERFORMANCE OF DUTIES

DATE: 05/29/96

SIGNATURE: 

(Registered agent)

FILED  
MAY 29 1996  
TALLAHASSEE, FLORIDA

MAY 29 PM 1:39

FILED