

P96000068156

LAZARUS CORPORATE INDUSTRIES, INC.

Requestor's Name

890 S.W. 07 AVENUE SUITE 16

Address

MIAMI, FLORIDA 33174 (305)552-5973

City/State/Zip

Phone #

LOCAL REPRESENTATIVE TALLAHASSEE

Office Use Only

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

1. MIB MEDICAL INSTITUTE & DIET CENTER, INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 9:00

☐ 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

Date AUGUST 13, 1996

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

Re MB MEDICAL INSTITUTE & DIET CENTER, INC., Inc.
(name of corporation)

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

(individual's name)

MB MEDICAL INSTITUTE & DIET CENTER, INC.
(name of corporation)

MAILING ADDRESS OF CORPORATION		
7914 S.W. 162 PLACE		
MIAMI, FLORIDA 33193		
PHONE		
(305)	380-1733	
Area Code	Number	Ext.

ARTICLES OF INCORPORATION

of
MB MEDICAL INSTITUTE & DIET CENTER, INC.

(name of corporation)

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

ARTICLE I - CORPORATE NAME

The name of the corporation is:

MB MEDICAL INSTITUTE & DIET CENTER, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue FIVE HUNDRED shares (500) of ONE Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	BELKIS M. PLASENCIA		
ADDRESS	7821 CORAL WAY, SUITE 117		
CITY	MIAMI	FLORIDA	ZIP 33155

The principal office, if known, or the mailing address of the corporation is:

NAME	MB MEDICAL INSTITUTE & DIET CENTER, INC.		
ADDRESS	7821 CORAL WAY, SUITE 117		
CITY	MIAMI	FLORIDA	ZIP 33155

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	BELKIS M. PLASENCIA	PRESIDENT
ADDRESS	7821 CORAL WAY, SUITE 117	
CITY	MIAMI	STATE FLORIDA ZIP 33155
NAME	MIGUELINA C. RODRIGUEZ	VICE PRESIDENT
ADDRESS	7821 CORAL WAY, SUITE 117	
CITY	MIAMI	STATE FLORIDA ZIP 33155
NAME		
ADDRESS		
CITY		STATE ZIP

**CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT**

CERTIFICATE OF REGISTERED AGENT

OF

MB MEDICAL INSTITUTE & DIET CENTER, INC.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 7821 CORAL WAY, SUITE 117

MIAMI, FLORIDA 33155

has named BELKIS M. PLASENCIA

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

Belkis M. Plascencia
(registered agent)

FILED
96 JUN 15 PM 1:10
TALLAHASSEE, FLORIDA