CAPITAL CONNECTION, INC. 86244

437 E. Vlighila St., Suite 4, Tallahassee, FL 32301, (904)224-8870 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302 TOLL FREE No. 1-800-342-8062 FAX (904) 222-1222

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Please remit invoice number with payment TERMS: NET to DAYS FROM INVOICE DATE 1 1/2% per month on Past Due Amounts Past 30 Days, 16% per Annum,

THANK YOU from
Your Capital Connection

ARTICLES OF INCORPORATION

OF

CENTRO CLINICO LA SAGRADA FAMILIA, INC.
(SACRED MEDICAL CENTER FOR THE FAMILY, INC.)

ARTICLE I NAME

The name of the corporation shall be:
CENTRO CLINICO LA SAGRADA FAMILIA, INC.
(SACRED MEDICAL CENTER FOR THE FAMILY, INC.)



ARTICLE II DURATION

This Corporation shall have perpetual existence.

ARTICLE III PURPOSE

This Corporation is organized for the purpose of being subsidiary or filial of "CENTRO CLINICO LA SAGRADA FAMILIA, S.A." a corporation organized and existing under the laws of the Republic of Venezuela, which corporation will own at least seventy (70%) percent of outstanding stocks of the presently created corporation. This corporation is also organized for the purpose of transacting any or all lawful business.

ARTICLE IV CAPITAL STOCK

This Corporation is authorized to issue one hundred (100) shares of common stock without par value.

ARTICLE V INITIAL REGISTERED AGENT OFFICE AND AGENT

The street address of the initial registered office of this corporation is:

1699 Coral Way Suito 315 Miami, Florida 33145

The name of the initial registered agent of this corporation at that address is:

ANTONIO E. ALONSO

ARTICLE VI MAILING ADDRESS

The mailing address of the corporation is:

9858 N. Kendall Drive Apt. No. E 108 Miami, Florida 33176

ARTICLE VII INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director initially. The number of director may be either increased or diminished from time to time by the By-Laws, but shall never be less that one (1).

The names and post office address of the members of the Board of Directors are:

NAME

ADDRESS

JACQUELINE GRECO

9858 N. Kendall Dr. Apt. No. E 108 Miami, Florida 33176

ARTICLE VIII INCORPORATORS

The name and post office address of the subscriber of these Articles of Incorporation is:

NAME

ADDRESS

JACQUELINE GRECO

9858 N. Kendall Dr. Apt. No. E 108 Miami, Florida 33176

ARTICLE IX AMENDMENT

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment to them, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation on this <u>15th</u> day of <u>October</u>, 1996.

INCORPORATOR: JACQUELINE GRECO

STATE OF FLORIDA) (SS COUNTY OF DADE)

BEFORE ME, a notery public, authorized to take acknowledgment in the State and County, set forth above, personally appeared JACQUELINE GRECO, known to me and known to be the person who executed the foregoing Articles of Incorporation and she acknowledged before me that she executed these Articles of Incorporation.

IN WITNESS WHEREOF, she has hereunto set her hands and affixed her official seal, in the State and County aforesaid, that I relied upon the following form(s) of identification of the above-named person(s):

A valid Florida Driver's License and that an oath (was) (was not) taken, this 15th day of October , 1996.

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE

My Commission Expires:

OFFICIAL NOTARY SEAL
OLGA B GARCIA
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC238062
MY COMMISSION EXP. OCT. 25,1996

CERTIFICATE OF REGISTERED AGENT

llaving been named to accept service of process for the above corporation at the place designated in those Articles of Incorporation, 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.

ANTONIO E. ALONSO Registered Agent

Dated:_ October 15th, 1996

ARTICLES OF INCORPORATION

OF

CENTRO CLINICO LA SAGRADA FAMILIA, INC.
(SACRED MEDICAL CENTER FOR THE FAMILY, INC.)

ARTICLE I NAME

The name of the corporation shall be: CENTRO CLINICO LA SAGRADA FAMILIA, INC. (SACRED MEDICAL CENTER FOR THE FAMILY, INC.)

ARTICLE II DURATION

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ARTICLE V INITIAL REGISTERED AGENT OFFICE AND AGENT

The street address of the initial registered office of this corporation is:

1699 Coral Way Suite 315 Miami, Florida 33145

The name of the initial registered agent of this corporation at that address is:

ANTONIO E. ALONSO

ARTICLE VI MAILING ADDRESS

The mailing address of the corporation is:

9858 N. Kondall Drive Apt. No. E 108 Miami, Florida 33176

ARTICLE VII INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director initially. The number of director may be either increased or diminished from time to time by the By-Laws, but shall never be less that one (1).

The names and post office address of the members of the Board of Directors are:

NAME

ADDRESS

JACQUELINE GRECO

9858 N. Kendall Dr. Apt. No. E 108 Miami, Florida 33176

ARTICLE VIII INCORPORATORS

The name and post office address of the subscriber of these Articles of Incorporation is:

NAME

ADDRESS

JACQUELINE GRECO

9858 N. Kendall Dr. Apt. No. E 108 Miami, Florida 33176

ARTICLE IX AMENDMENT

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment to them, and any right conferred upon the shareholders is subject to this reservation.

INCORPORATOR: JACQUELINE GRECO

STATE OF FLORIDA) (SS COUNTY OF DADE)

BEFORE ME, a notary public, authorized to take acknowledgment in the State and County, set forth above, personally appeared JACQUELINE GRECO, known to me and known to be the person who executed the foregoing Articles of Incorporation and she acknowledged before me that she executed these Articles of Incorporation.

> NOTARY PUBLIC, STATE OF FLORIDA AT LARGE

My Commission Expires:

OFFICIAL NOTARY SEAL
OLGA B GARCIA
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC238062
MY COMMISSION EXP. OCT. 25,1996

CERTIFICATE OF REGISTERED AGENT

Having been named to accept service of process for the above corporation at the place designated in these Articles of Incorporation, 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.

ANTONIO E. ALONSO Registered Agent

Dated: October 15th, 1996

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