

P96000096678

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

7000002015957-3

-11/27/96--01058--020

\*\*\*\*\*78.75 \*\*\*\*\*78.75

Office Use Only

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

1. KIDS' R US DAY CARE, 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

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

NOV 27 1996

BSB

FILED  
96 NOV 27 PM 2:46  
RECEIVED  
96 NOV 27 AM 11:27  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Date NOVEMBER 25, 1996

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

Re KIDS' R US DAY CARE, CORP. 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)

KIDS' R US DAY CARE, CORP.  
(name of corporation)

MAILING ADDRESS OF CORPORATION		
28945 SOUTH DIXIE HIGHWAY		
MIAMI, FLORIDA. 33033		
PHONE		
( 305 )	221- 4131	
Area Code	Number	Ext.

# ARTICLES OF INCORPORATION

of  
KIDS' R US DAY CARE, CORP.  
(name of corporation)

FILED

96 NOV 27 PM 2:46

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.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE I - CORPORATE NAME

The name of the corporation is:

KIDS' R US DAY CARE, CORP.

## 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	JHACNEA LEAL
ADDRESS	28945 SOUTH DIXIE HIGHWAY
CITY	MIAMI, FLORIDA
ZIP	33033

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

NAME	KIDS' R US DAY CARE, CORP.
ADDRESS	28945 SOUTH DIXIE HIGHWAY
CITY	MIAMI, FLORIDA.
ZIP	33033

## ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE ( 1 ) 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	JHACNEA LEAL	PRESIDENT	100%	SHARES
ADDRESS	28945 SOUTH DIXIE HIGHWAY			
CITY	MIAMI	STATE	FLORIDA	ZIP 33033
NAME				
ADDRESS				
CITY		STATE		ZIP
NAME				
ADDRESS				
CITY		STATE		ZIP

# ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	JHACNEA LEAL		
ADDRESS	28945 SOUTH DIXIE HIGHWAY		
CITY	MIAMI	STATE	FLORIDA
		ZIP	33033
NAME			
ADDRESS			
CITY		STATE	
		ZIP	
NAME			
ADDRESS			
CITY		STATE	
		ZIP	

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 25 day of NOVEMBER, 19 96

\_\_\_\_\_  
(Seal)

\_\_\_\_\_  
(Seal)

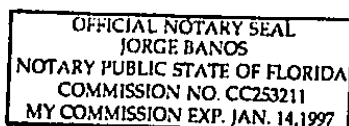
\_\_\_\_\_  
(Seal)

STATE OF FLORIDA )  
COUNTY OF DADE ) SS

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

<u>Jhacnea Leal</u> Signature	FLORIDA DRIVER'S LICENSE (L400-420-73-593-0) Form of Identification
_____ Signature	_____ Form of Identification
_____ Signature	_____ Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that SHE executed these Articles of Incorporation, that I relied upon the form of identification of the above named person, as indicated opposite each name, and that an oath was not taken.



Witness my hand and official seal in the County and State last aforesaid this 25 day of NOVEMBER, 19 96

Jorge Banos  
Jorge Banos  
Notary Public

CERTIFICATE AND ACKNOWLEDGEMENT  
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT  
OF

**FILED**  
96 NOV 27 PM 2:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

KIDS' R US DAY CARE, CORP.  
(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 28945 SOUTH DIXIE HIGHWAY  
MIAMI, FLORIDA. 33033

has named JHAGNEA LEAL  
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.

  
(registered agent)