P97000014399

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 CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Walk in Walk in Certificate of Status Photocopy Mail out Will wait NEW FILINGS AMENDMENTS. 47 Amendment **Profit** Resignation of R.A., Officer/Director **NonProfit** Change of Registered Agent **Limited Liability** 57 FEB 12 IM 10: 52

57 FEB 12 Dissolution/Withdrawal **Domestication** Merger Other OTHERUILINGS **COUALIFICATION Annual Report** Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

1 6 1 2 1997

Examiner's Initials



February 12, 1997

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

SUBJECT: NUTRIREHAB CENTER, INC. Ref. Number: W9700003486

We have received your document for NUTRIREHAB CENTER, 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):

PLEASE COMPLETE THE PRINCIPAL OFFICE OF BUSINESS IN ARTICLE VI.,

The registered agent and registered office listed in your articles of incorporation must be consistent throughout the document.

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.

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

Sandy Ng Document Specialist

Letter Number: 097A00007477

FILED

NAME

97 FEB 13 PM 4: 20

THIS IS TO CERTIFY that we, the undersigned, hereby associateSTATE ourselves together for the purpose of becoming a corporation while ORIDA the laws of the State of Florida, by and under the provisions of the Statutes of Florida, providing for the formation, liability, rights, privileges and immunities of a corporation for profit.

ARTICLE I

CORPORATE NAME

The name of this corporation is:

NUTRIREHAB CENTER , # C.

ARTICLE II

NATURE OF BUSINESS

The **general** mature of the business and the objects and purposes proposed to be transacted and carried on, are to do any and all of the things herein mentioned, fully and to the same extend as a natural person, might or could do, viz:

- a) To purchase, acquire, hold, improve, sell, convey, assign, release, mortgage, encumber, lease, hire, construct, equip, operate, manage, and in any other manner deal in real and/or personal property of every name and nature, including stocks and securities of other corps., and to loan money and to take securities for the payment of all sums due the corporation, and to sell, assign, and release such securities, and to carry on any useful business in connection therewith.
- b) to engage in and carry on any business or businesses every act or dead pertaining thereto, either directly or indirectly, which is not prohibited by the laws of the State of Florida, and to so engage in and carry on said business in Florida or any other State in the United States or in any foreign country.
- c) to do any and all things necessary, suitable, useful, proper or admissible for the accomplishment of any one of the purposes or for the attainment of any of the objects or further exercise of the power herein set forth, whether herein specified or not, either alone or in connection with other firms, individuals, of corporations, either in the State or throughout the United States, and elsewhere, and to do any other acts or things incidental or pertinent to or connected with the business herein before described or any part or parts thereof, if not inconsistent with the laws under which this corporation is organized.

d) that the main business of the corporation is as follows:

TO PROVIDE PARTY GOODS

ARTICLE III

CAPITAL STOCK

The total amount of the authorized capital stock of the corporation shall be 600 shares of common stock, at \$1.00 Par Value.

The whole or any part of the capital stock of said Corporation shall be payable in lawful money of the United States of America, or property, labor or services, at a just valuation to be fixed by the Board of Directors, property or labor may also be purchases with the capital stock at such valuation as shall be fixed by the Board of Directors.

ARTICLE IV

AMOUNT OF CAPITAL TO BEGIN BUSINESS

The amount of capital with which the corporation shall begin business shall be no less than HUNDRED DOLLARS.

ARTICLE V

CORPORATION EXISTENCE

The corporation shall have perpetual existence unless sooner dissolve, according to law.

ARTICLE VI

PRINCIPAL PLACE OF BUSINESS

The principal place of business of said Corporation Shall be:

6035 S.W.40th Street, Miami, Florida 33155 with the privilege, however, of having branch offices or places of business at any other place or places within or without the State of Florida, or in foreign countries.

ARTÍCLE VII

INITIAL BOARD OF DIRECTORS AND OFFICERS

The Corporation shall have one (1) directors initially, whose number may be increased or diminished by the by-laws from time to time but shall never be less than one (1). The names and post office addresses of the members of the first Board of Directors of this corporation, the PRESIDENT, SECRETARY who subject to the provisions of the Articles of Incorporation and the by-laws and General Corporation laws of the State of Florida, shall hold office for the first year of the corporation's existence, or until their successors are elected and have qualified, are as follows:

Name	Officer	Address
Carlos M. Garrido, M.D.	President & Treasurer	450 S.W. 136 Place Miami, Fl 33184
Manuel Espinosa	Secretary & Vice-President	2291 S.W. 1st Street Miami, Fl 33135

ARTICLE VIII

BY-LAWS

The power to adopt, alter, amend or repeal by-laws shall be vested in the Board of Directors and the shareholders.

ARTICLE IX

NAME AND ADDRESS OF SUBSCRIBERS AND NUMBER OF SHARES

Shares of the capital stock of this corporation shall be issued initially to the following persons and in the amounts opposite to their names:

Carlos Garrido 450 S.W. 136 Place Miami, Fl 33184

300 SHARES

Manuel Espinosa 2421 San Domingo Coral Gables, Fl 33134

300 SHARES

ARTICLE X

AMÉNDMENT

This corporation reserves the right to amend, alter, change, or repeal any provision contained in the Articles of incorporation in the manner now or hereafter prescribed by law, and all rights conferred on stockholders herein are granted subject to this reservation.

ARTICLE XI

INCORPORATIONS

The name and addresses of the persons signing these articles are:

Carlos Garrido 450 S.W. 136 Place Miami, Fl 33184

Manuel Espinosa 2291 S.W. 1st Street Miami, Fl 33135

ARTICLE XII

REGISTERED OFFICE AND REGISTERED AGENT

This corporation designates as Registered offices:

6035 S.W. 40th Street, Miami, Fl 33155

This corporation designates as Registered agent:

MANUEL ESPINOSA

STATE OF FLORIDA >

COUNTY OF DADE

Signature

dignature

BEFORE ME the undersigned authority, personally appeared Carlos Garrido, M.D. and Manuel Espinosa, to me well known to be the person described in and who executed and subscribed the foregoing Articles of Incorporation, and they acknowledge before me, that they executed the same and subscribed to the same for the purposes therein expressed.

IN WITNESS my hand and official seal at Dade County, Florida, this 24 day of fanctory, 1997.

NOTARY PUBLIC, State of Florida At Large

My Commission Expires:

ISABEL TEIXIDOR MY COMMISSION # CC300127 EXPIRES July 6, 1997 BONDED THRU TROY FAIN INSURANCE, INC.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

FILED 97 FEB 13 PH 4: 20

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, SEORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNAERATAGE E. FLORIDA 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: NUTRIREHAB CENTER, TAC.
- 2. The name and address of the registered agent and office is:

Manuel Espinosa 6035 SW 40th Street Miami, Fl 33155

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(SIGNATURE)

(DATE)