P97000096379

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

	****122.50 ****122.50			
SUBJECT:		11000111110	RATION	 .
	(Proposed corpo	rate name - must include su	mx)	
Enclosed is an original	and one(1) copy of the article	s of incorporation and a	check for :	7
\$70.00	\$78.75	△\$122.50	□ \$131.25	
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	<u></u>
FROM: _	JOHN PACHIVAS			
	Name (P	rinted or typed)		ā
	287 NE 118 Ter	A 1 1		
	•	Address	V.L.V.	97 N
	Miami, FL. 33160		H.S.	VO.
	City,	State & Zip	SEE SEE	IO PHI2:
\ \ \	305 389-9185		ان بر بر	3 5 5
Maker		elephone number		<u></u>
THORIZATION BY PHO	ONE TO	-	A	
PRREUT TOM)	2		
11297				
WE W.		 .		
DC. EXAM	OTE: Please provide the o	riginal and one copy o	f the articles.	.lnk
-`	ı	_ **	AM-	

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: MED. TECH INDUSTRIES CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

PO BOX 601176 Miami, FL 33161

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

John Pachivas, 287 NE 118 TERR Miami, FL. 33160

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

John Pachivas, * 287 NE 118 TERR Miami FL. 33160

Signature/Incorporator

11-06-97

Date

(An additional article must be added if an effective date is requested.)

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 obligation of my position as registered agent

Signature/Registered Agent

11-06-97

Date