

LAZARUS CORPORATE INDUSTRIES, INC.

Requestor's Name

898 S.W. 87 AVENUE, SUITE 100

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. JAVED K. SHINWARI, MD, PA
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

FILED
97 DEC 24 PM 3:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

☒ 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

300002382703-C

-12/26/97-01001-018

***122.00 ***122.00

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

897A-60382

12/24

RECEIVED
97 DEC 24 PM 2:30
JESSICA L. CORPORATION

Examiner's Initials

ARTICLES OF INCORPORATION
OF
JAVED K. SHINWARI, MD, PA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

97 DEC 24 PM 3:21

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

ARTICLE I. NAME

The name of the corporation shall be:

JAVED K. SHINWARI, MD, PA

The principal address of this corporation shall be:

*1925 BRICKELL AVENUE, D-1002
MIAMI, FL 33129*

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities for business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation. Physician - Hematology/Oncology.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock have a par value of \$1.00 per share.

ARTICLE IV. ADDRESS

The street address of the initial registered office of the corporation shall be 1925 BRICKELL AVENUE, D-1002, MIAMI, FL 33129 and the name of the initial registered agent of the corporation at that address DR. JAVED K. SHINWARI.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. SPECIAL PROVISION

This corporation shall have officer(s) and Director(s), initially. The name and street address of the initial officer(s) and director(s) who shall hold office for the first year of the corporation, of until his successor is elected or appointed are/is:

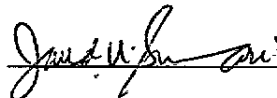
DR. JAVED K. SHINWARI PRESIDENT
1925 BRICKELL AVENUE, D-1002
MIAMI, FL 33129

ARTICLE VII. SUBSCRIBER

The name and street address of the subscriber to these Articles of Incorporation is:

DR. JAVED K. SHINWARI
1925 BRICKELL AVENUE, D-1002
MIAMI, FL 33129

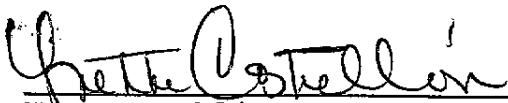
In WITNESS WHEREOF, the undersigned has hereunto set her hand and seal on this 12 day of DECEMBER 1997.

 (SEAL)

State of Florida

County of Dade

The foregoing instrument was acknowledged before me this 12
day of DECEMBER 1997, by



Notary Public, State of Florida at Large

My Commission Expires



YVETTE CASTELLON
COMMISSION # EC 380683
EXPIRES JUN 8, 1998
BONDED THRU
ATLANTIC BONDING CO., INC.

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the 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:

JAVED K. SHINWARI, MD, PA

2. The name and address of the registered agent and office is:

DR. JAVED K. SHINWARI

(Name)

1925 BRICKELL AVENUE, D-1002

(P.O. Box NOT ACCEPTABLE)

MIAMI, FL 33129

(City/State/Zip)

SIGNATURE

Javed K. Shinwari
(Corporate officer)

TITLE

President

DATE

12/22/97

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. 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

Javed K. Shinwari

DATE

12/22/97

FILED
DEC 24 PM 3:21
CLERK OF STATE
TALLAHASSEE, FLORIDA