

P98000066940

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

300002589819--7  
-07/27/98--01127--009  
\*\*\*122.50 \*\*\*122.50

Subject: AL-JAWHARA PHARMACEUTICALS USA INC.

Enclosed is an original and two (2) copies of the articles of incorporation and a check for \$122.50 for the Filing Fee, Certified Copy and Certificate.

FROM: CECILIA SIGLER  
14842 BRECKNESS PL.,  
MIAMI LAKES, FL 33016  
TELEPHONE NO: 305-512-9220

(305) 408-0831  
✓ Roland

Roland GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT: art. 1 certified  
DATE: 7/30/98  
DOC. EXAM: TA

98 JUL 27 PM 2:37  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

✓ Roland sd.  
send to Cecilia.

TA-7/30/98

ARTICLES OF INCORPORATION

ARTICLE I NAME

The name of the corporation shall be:

AL-JAWHARA PHARMACEUTICALS USA INC.

ARTICLE II PRINCIPAL OFFICE

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

1950 BRICKELL AVENUE, SUITE 108  
MIAMI, FL. 33129

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ARTICLE III SHARES

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

1,000 (one thousand) shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CECILIA SIGLER  
14842 BRECKNESS PL.  
MIAMI LAKES, FL. 33016

TELEPHONE NO.: 305-512-9220



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

PURSUANT TO THE PROVISION 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.

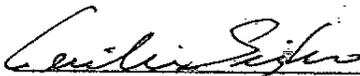
1. The name of the corporation is: AL-JAWHARA PHARMACEUTICALS USA INC.
2. The name and address of the registered agent and office is:

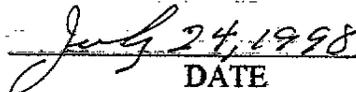
CECILIA SIGLER

14842 BRECKNESS PLACE

MIAMI LAKES, FL. 33016

*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 appointments 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.*

  
CECILIA SIGLER

  
DATE

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