

(((H98000020541 2)))

TO: DIVISION OF CORPORATIONS FAX #: (850)922-4001

FROM: ACE INDUSTRIES. INC.

ACCT#: 070744001530

CONTACT: PAM FRIEDMAN PHONE: (305)358-2571

FAX #: (305)358-7832

NAME: TROPICAL MEDICAL SERVICES. INC.

AUDIT NUMBER...... H98000020541

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS...0 CERT, COPIES.....1

PAGES..... 1 DEL.METHOD.. FAX

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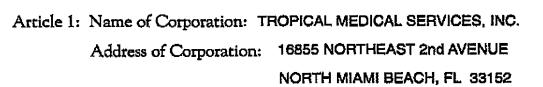
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ARTICLES OF INCORPORATION





Article 2: CAPITAL STOCK: The number of shares which the corporation has authorized to be outstanding at any one time is 1.000 , with a par value of \$0.01 . (PAR VALUE IS NOT REQUIRED).

Article 3: REGISTERED AGENT: CARMEN V. COLON

REGISTERED OFFICE: 16855 NORTHEAST 2nd AVENUE

NORTH MIAMI BEACH, FL 33152

* I am familiar with and hereby accept the duties and responsibilities as Registered Agent for said corporation.

<u>11 / 04 / 98</u> Dare Carmen V. Calen

Signature of Registered Agent

Article 4: The Board of Directors are: (Board of Directors is NOT REQUIRED).

First listed is President, second is Vice President, then Secretary/Treasurer.

- 1. LEONARD I. WEINSTEIN, 16855 NORTHEAST 2nd AVENUE, NORTH MIAMI BEACH, FL 33152
- 2, CARMEN V. COLON, 16855 NORTHEAST 2nd AVENUE, NORTH MIAMI BEACH, FL 33152

3.

Article 5: The NAME and ADDRESS of the INCORPORATOR is:

CARMEN V. COLON

16855 NORTHEAST 2nd AVENUE

NORTH MIAMI BEACH, FL 33152

In witness whereof, I have subscribed my name:

Carmen V Colin

Signature of Incorporator

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Prepared by: Ace Industries, Inc., 54 NW 11th Street, Miami, FL 33136, (305) 358-2571