# P9900069281

## Florida Department of State

Division of Corporations
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Division of Corporations

Fax Number : (850)922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 \_\_\_\_\_ Phone : (305)599-0839

Fax Number : (305)599-0839

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# FLORIDA PROFIT CORPORATION OR P.A.

PHARMACY STORE, CORP.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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#### ARTICLES OF INCORPORATION

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PHARMACY STORE, CORP.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

#### ARTICLE I

The name of the corporation shall be:

PHARMACY STORE, CORP.

#### ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

#### ARTICLE III

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things therein mentioned, as fully and to the same extent as natural persons might do, viz:

PREPARED: ANA DALMAU ARES 3636 S.W. 87<sup>TH</sup> AVENUE MIAMI FL. 33155 99 AUG -4 PH 3: 28

- (1) Transact any and all lawful business.
- (2) Said corporation shall further have power.

To have perpetual succession by its corporate name,

PHARMACY STORE, CORP.

#### ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$10.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

#### **ARTICLE V**

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

DORYS M. GOLDSTON 14804 S.W. 72TH TERRACE MIAMI, FLORIDA 33193

The principal office shall be:

14804 S.W. 72TH TERRACE MIAMI, FLORIDA 33193

#### ARTICLE VI

The initial Board of Directors shall consist of a total of (5) persons, and the names and addresses are:

DR. HARUN AVAKIAN 2<sup>ND</sup> AVE. C/ CALLE 5<sup>TE</sup> Res. Los Arrendaĵos Apt. 2A Montalban CARACAS 1020 – VENEZUELA

PRESIDENT

50%

JACQUELINE AVAKIAN

2<sup>ND</sup> AVE. C/CALLE 5<sup>TH</sup> Res. Los Arrendajos Apt. 2A.

Montalban, CARACAS 1020 - VENEZUELA

VICE-PRESIDENT 50

The name and address of the incorporate executing these Articles of Incorporation is:

DR: HARUN AVAKIAN

2<sup>ND</sup> AVE. C/CALLE 5<sup>TH</sup> Res. Los Arrendajos Apt.
# 2-A Montalban

CARACAS - VENEZUELA

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation, this 12<sup>th</sup> day of JULY, 1999.

Dr Harm Aughian

### CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to the provision of sections 607.0501 or 617.0501, 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:

PHARMACY STORE, CORP.

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

DORYS M. GOLDSTON 14804 S.W. 72TH TERRACE MIAMI, FLORIDA 33193

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 POSITIONS AS REGISTERED AGENT.

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SIGNATURE

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SECRETARY OF STATE