

P03000123930

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

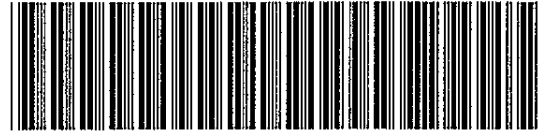
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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10/24/03--01053--017 \*\*612.50

03 OCT 24 PM 2:49  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA



**TRANSMITTAL LETTER**

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

**SUBJECT:** F.A. Javier, Inc.  
**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** DiPasquale & Associates, P.A.  
Name (Printed or typed)

14345 Sunset Lane  
Address

Ft. Lauderdale, FL 33330  
City, State & Zip

(954) 252-7200  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**FILED**

03 OCT 24 PM 2:49

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

F.A. Javier, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

419 Lakeside Drive  
Tamarac, FL 33319

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any lawful purpose

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Francisco Anistizabal, President  
419 Lakeside Drive  
Tamarac, FL 33319

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

Francisco Anistizabal  
419 Lakeside Drive  
Tamarac, FL 33319

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Francisco Anistizabal  
419 Lakeside Drive  
Tamarac, FL 33319

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*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

X Francisco Anistizabal  
Signature/Registered Agent

10/17/03  
Date

X Francisco Anistizabal  
Signature/Incorporator

10/17/03  
Date