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(Requestor's Name)

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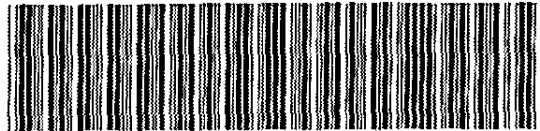
(Business Entity Name)

(Document Number)

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

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TALLAHASSEE, FLORIDA

~~11-23-03~~

1-23

TRANSMITTAL LETTER

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

SUBJECT: COZAL TECH FINANCIAL 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: Alexandrio Tobon  
Name (Printed or typed)

9370 SW 87 AVE. H S 2  
Address

MIAMI FL 33176  
City, State & Zip

305-479-4768  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

August 27, 2003

ALEXANDRO TOBON  
9370 SW 87 AVE  
#S2  
MIAMI, FL 33176

SUBJECT: CORAL TECH FINANCIAL INC.  
Ref. Number: W03000024542

We have received your document for CORAL TECH FINANCIAL INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6884.

Shawn Logan  
Document Specialist  
New Filings Section

Letter Number: 503A00048401

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

The name of the corporation shall be:

Coral Tech Financial Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

9370 SW 87<sup>th</sup> Ave. # S 2 Miami Fl. 33176

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Providing accounting services to clients

**ARTICLE IV SHARES**

The number of shares of stock is:

1,000

**ARTICLE V INITIAL DIRECTORS/OFFICERS**

The name(s), address(es) and title(s):

Alexandro Marin Tobon, 9370 SW 87<sup>th</sup> Ave. # S 2 Miami Fl. 33176 President

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

Alexandro Marin Tobon, 9370 SW 87<sup>th</sup> Ave. # S 2 Miami Fl. 33176 President

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Alexandro Marin Tobon, 9370 SW 87<sup>th</sup> Ave. # S 2 Miami Fl. 33176 President

.....  
*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.*

\_\_\_\_\_  
Signature/Registered Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 JAN 23 AM 10:55

FILED