

P9500063740

LAZARUS CORPORATE INDUSTRIES, INC.
(Requestor's Name)

890 S.W. 87 AVENUE, SUITE: 16
(Address)

MIAMI, FLORIDA 33174 (305) 552-5973
(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

(904) 385-6715

OFFICE USE ONLY

200001563892
-08/17/95-01005-031
*****78.75 *****78.75

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. WORLD STAR INSURANCE, CORP.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☐ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☒ Certificate of Status

NEW FILINGS	
☒	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A. Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

FILED
95 AUG 17 PM 1:14
STATE
OF FLORIDA

SDG

Examiner's Initials

ARTICLES OF INCORPORATION

of

WORLD STAR INSURANCE, CORP.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

WORLD STAR INSURANCE, CORP.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue FIVE HUNDRED shares (500) of ONE Dollar(s) (\$1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	ISABEL RAMOS		
ADDRESS	8025 BYRON AVE. #5		
CITY	MIAMI BEACH	FLORIDA	ZIP 33141

The principal office, if known, or the mailing address of the corporation is:

NAME	WORLD STAR INSURANCE, CORP.		
ADDRESS	8025 BYRON AVE. #5		
CITY	MIAMI BEACH	FLORIDA	ZIP 33141

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	CELIA M. DUARTE	PRESIDENT
ADDRESS	8025 BYRON AVE #5	
CITY	MIAMI BEACH	STATE FLORIDA ZIP 33141
NAME	ISABEL RAMOS VICE PRESIDENT SECRETARY TREASURER	
ADDRESS	8025 BYRON AVE. #5	
CITY	MIAMI BEACH	STATE FLORIDA ZIP 33141
NAME		
ADDRESS		
CITY		STATE ZIP

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	CELIA M. DUARTE		
ADDRESS	8025 BYRON AVE. #5		
CITY	MIAMI BEACH	STATE	FLORIDA ZIP 33141
NAME	ISABEL RAMOS		
ADDRESS	8025 BYRON AVE. #5		
CITY	MIAMI BEACH	STATE	FLORIDA ZIP 33141
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 16 day of AUGUST, 1995

_____(Seal)
_____(Seal)
_____(Seal)

STATE OF FLORIDA)
COUNTY OF DADE) SS

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

CELIA M. DUARTE and ISABEL RAMOS

Signature

Signature

Signature

FL DL D630-113-64-770-0

Form of Identification

PERSONALLY KNOWN

Form of Identification

Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that THEY executed these Articles of Incorporation, that I relied upon the form of identification of the above named person as indicated opposite each name, and that an oath was not taken.

Banos
NOTARY PUBLIC STATE SEAL

Witness my hand and official seal in the County and State last aforesaid this 16 day of AUGUST, 1995

OFFICIAL NOTARY SEAL
JORGE BANOS
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC25211
MY COMMISSION EXP. JAN. 14, 1997

Notary Signature

JORGE BANOS

Printed Notary Signature

**CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT**

**CERTIFICATE OF REGISTERED AGENT
OF**

WORLD STAR INSURANCE, CORP.
(name of corporation)

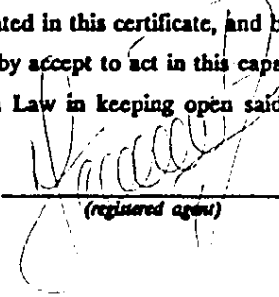
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 8025 BYRON AVE. #5
MIAMI BEACH, FLORIDA 33141

has named ISABEL RAMOS
located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.


(registered agent)

95 AUG 17 PM 1:14
SECRETARY OF STATE
ALLIANCE 910497