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5/03 FLORIDA DIVISION OF CORPORATIONS 2:04 PM  
PUBLIC ACCESS SYSTEM  
ELECTRONIC FILING COVER SHEET  
((H96000006318))  
TO: DIVISION OF CORPORATIONS FROM: FAG-T CORP. AGENTS, INC.  
DEPARTMENT OF STATE 8405 NW 53RD ST  
STATE OF FLORIDA SUITE C-100  
409 EAST GAINES STREET MIAMI FL 33166- 9-0000  
TALLAHASSEE, FL 32399 CONTACT: LIDIA FERNANDEZ  
FAX: (904) 922-4000 PHONE: (305) 599-0839  
FAX: (305) 592-9591  
DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: A-1+ CORPORATION  
FAX AUDIT NUMBER: H96000006318 CURRENT STATUS: REQUESTED  
DATE REQUESTED: 05/03/1996 TIME REQUESTED: 14:04:36  
CERTIFIED COPIES: 0 CERTIFICATE OF STATUS: 1  
NUMBER OF PAGES: 3 METHOD OF DELIVERY: FAX  
ESTIMATED CHARGE: \$78.75 ACCOUNT NUMBER: 071001002335  
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FILED  
96 MAY -6 PM 4:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

~~5/4/96 9:50~~  
*Re-send 1st page*  
*[Signature]*  
*5/6*

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96 MAY -3 PM 4:21  
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

May 6, 1996

FAS-T CORP. AGENTS, INC.

MIAMI, FL

SUBJECT: A-1+ CORPORATION  
REF: W96000009530

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

PLEASE RE-FAX PAGE 1 OF THE ARTICLES.

Please return 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 (904) 487-6934.

Loria Poole  
Corporate Specialist

FAX Aud. #: B96000006318  
Letter Number: 996A00021840

DIVISION OF CORPORATIONS

96 MAY -6 PM 3:00

RECEIVED

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

**ARTICLES OF INCORPORATION**

*The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

**ARTICLE I NAME**

The name of the corporation shall be:

**A-1+ CORPORATION**

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**ARTICLE II PRINCIPAL OFFICE**

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

**940 East 35th St.  
HIALEAH, FL. 33013**

**ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

**100Shares Common Stock / \$1.00 par value**

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

The name and address of the initial registered agent is:

**MARIO PENALVER  
940 East 35th St.  
Hialeah, Fl. 33013**

**Prepared by: M. Penalver  
940 East 35th St.  
Hialeah, Fl. 33013  
Ph: (305) 820-9343**

**ARTICLE V INCORPORATOR(S)**

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

MARIO PENALVER (Pres)                      940 East 35th St. Hialeah, Fl. 33013

MARIO PENALVER, Jr.                      940 East 35th St. Hialeah, Fl. 33013  
(Soc/D)

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

3rd day of May, 19 96.

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: A-1+ CORPORATION

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

MARIO PENALVER  
(NAME)  
940 East 35th St.  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)  
Hialeah, Fl. 33013  
(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

*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 position as registered agent.*

  
(SIGNATURE)

5/3/96  
(DATE)

**DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314**