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SECRETARY OF STATE
FINANCE FOR STATE
FOR STAT

203 / B.

TRANSMITTAL LETTER

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

SUBJECT: BRAZILIAN DANCE THERAPY CENTER, JNC.

Enclosed is 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			
		ADDITIONAL CO	PY REQUIRED			
FROM: GLACINEIDA SOUTO CASTRO Name (Printed or typed) 1401 VILLAGE BLVD #122 Address						
WEST PALM BEACH-FL_ 33409 City, State & Zip						
561-236-912 Daytime Telephone number						

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

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

\boldsymbol{A}	R	T	IC.	LE	I	NAME

The name of the corporation shall be:

orporator

BRAZILIAN DANCE THERAPY CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

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

The purpose for which the corporation is organized is: SPRE TO COMMUNITY PROVIDING ENTRETAIN DIRECT CONTRIBUTION TO PEOPLE WAND PHSYCOLOGICAL/MOTOR DISORE	EMENT TO ELDERS AND DISABLED. VITH DERRESSION, LUNISEIRECTE
ARTICLE IV MANNER OF ELECTION	- TOTAL DE LES VOTAL SERVIVE (DE
The manner in which the directors are elected or appointed:	
ANNUAL MEETING.	
ARTICLE V INITIAL DIRECTORS AND/OR OFFICE	<u>ERS</u>
List name(s), address(es) and specific title(s):	700
GLACINEIDA SOUTO CASTRO - PRESI	DENT.
MARIA G COSTA - VICE-PRESIDEI	AFRITA AFRITA
SANDER TEASURER.	, , D 1
JORGE E. CASTRO	
ARTICLE VI INITIAL REGISTERED AGENT AND	STREET ADDRESS
The name and Florida street address of the registered agent is	
Maria G. Costa.	55 S
1401 VILLAGE BLVD #122-	- · · · · · · · · · · · · · · · · · · ·
WEST PALM BEACH - FL-33409.	-
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
GLACINEIDA GOUTO CASTRO. 1401 VILLAGE BLUD #122.	
WE ST PALM BEACH - FL 33409 ************************************	**************
Having been named as registered agent to accept service of process for in this certificate, I am familiar with and accept the appointment as reg	
. And	01/08/04
Signature Registered Agent	Date
(b)	01/18/10/1

PLACE OF BUSINESS: 1263 S. MILITARY TRAIL - 2 ndfl. WEST FALM BEACH-FL MAILING ADDRESS: 1401 VIllage Blud #122 - WEST PALM BEACH-FL 33409