OFFIC EXPRESS CORPORATE FILING SERVICE INC. (Requestor's Name) 3940 W.FLAGLER ST. 2nd FLOOR (Address) MIAMI, FLORIDA 33134 (305)444-4994 (City, State, Zip) (Phone #) ******78.75 OFFICE USE ONLY

^	ENLOCOCISOS AND
(Corporation Name)	Enterprises, Corp.
•	(Document #) (Document #) (Document #) (Document #)
(Corporation Name)	(Document #)
	SSC 6
(Corporation Name)	(Document #)
(Corporation Name)	(Document #) (Document #) (Document #) (Document #)
Walk in Pick up tim	(DOCUMENTAL)
Mail out Will wait	Photocopy Certificate of Status
NEW FILINGS	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
Domestication	
	Dissolution/Withdrawal
Other	Merger A R R R R R R R R
OTHER FILNGS	REGISTRATION
Annual Report	REGISTRATION QUALIFICATION
Fictitious Name	Foreign
Name Reservation	Limited Partnership
1300170001	Reinstatement
	Trademark
	Other
T00 ((0 l00)	Examiner's Initials

Date MARCH 5, 2001.

	,	Date	20011	•			
Secretary of State		-		*			
Division of Corporations		-		•			
P.O. Box 6327		-		-			
Tallahassee, Fl. 32314		-			•		
Re	ANIDO'S	ENTERPRISES,	CORP.	· · · · · · · · · · · · · · · · · · ·	Inc.	*, ·) = 1
		of corporation)		·			
Gentlemen:							
Enclosed please find the oricheck in the amount of \$	ginal and one	copy of Articles	of Incorpora	ntion, togeth	ner with	my	
This represents the cost of Fee for Registered Agent D	the Filing Fees Designation for	s, Certified Copy the above name	of Articles of of of Articles of orporation	of Incorpora n.	ation and		
	Very	truly yours,					
		,					
			(individ	ual's name)			
			ANIDO'S E	NTFRPRTSE:	s. CORP.		
				of corporation			
		MAI	LING ADDRESS (OF CORPORATION	on —		-
		750 NW	43 AVE #40	4			
		እለተ <u>ለ</u> እለተ	FLORIDA	33126			
		MIAMI,	TONIDA				

_ PHONE _

305) 446-0091

Phone Number

Area Code

<u>ARTICLES OF INCORPORATION</u>

of

		01				
	ANIDO'S	ENTERPRISE	S, CORP.	<u></u>		<u> </u>
	(name of corporat	ion)			DSST OF P
The undersigned form a corporati	l subscriber(s) to these Articles on under the laws of the State	of incorporation of Florida.	, natural persoi	n(s) com	petent to cor	ntract, hereby
	ARTICL	E I - CORPOR	ATE NAME			OFF N
The name of the	corporation is:					
	ANIDO'S	ENTERPRISES	, CORP.			
This corporation	AR2 shall exist perpetually unless	TICLE II - DUR dissolved accordi		aw.		
	AR	TICLE III - PUI	RPOSE			
The corporation the United State	is organized for the purpose of and the State of Florida.	f engaging in any	activities or b	usiness j	permitted un	der the laws of
The corporation Dollar(s) (\$\frac{1}{2}	is authorized to issue FIVE	LE IV - CAPITA HUNDRED lue Common Stoc	shares (500 be desig	of _ nated "Com	ONE mon Shares".
	ARTICLE V - INITIA	AT DECISTERS	D OFFICE A	ND AG	ENT	
The street addre	ss of the Initial Registered Age	nt office and the	name of the In	itial Reg	istered Ager	it at that office is:
NAME	ROBERTO M. ANIDO			····	- 19	
ADDRESS	750 NW 43 AVE #404				- - 12 3	
CITY	MIAMI	STATE	FLORIDA	ZĬP	33126	
The principal of	ffice, if known, or the mailing	address of the co	rporation is:	·		
NAME	ANIDO'S ENTERPRISES	S, CORP.				
ADDRESS	750 NW 43 AVE #404	- -	·			
CITY	MIAMI	STATE	FLORIDA	ZIP	33126	
	APTICI F I/I	INITIAL BOAR	 PD OF DIREC	CTORS	7 T	· =
This corporation	1 -11 t ONE	/ 1) direc	tors initi	ally. The nu	mber of
directors may	se either increased or diminish	ed from time to ti	me by the By-I	Laws, bu	it shall be les	ss thatn one (1).
The names and	I addresses of the initial director	or(s) of the corpor	ation are as fo	nows:		<u></u>
NAME	ROBERTO M ANIDO	PRESIL	ENT	. ,		
ADDRESS	750 NW 43 AVE #404					
CITY	MIAMI	STATE	FLORIDA	ZIP	33126	· .

STATE

STATE

ZIP

ZIP

NAME ADDRESS

CITY

NAME ADDRESS

Article VII - INCORPORATORS

The names and addresses of the in	corporators signing t	hese Articles o	f Incorpo	ration are as:	follows:
NAME ROBERTO M. ANIDO	=				
ADDRESS 750 NW 43 AVE #404					
CITY MIAMI	STATE	FLORIDA	ZIP	33126	
NAME					
ADDRESS			÷	-	
CITY	STATE		ZIP		
NAME	_		•		
ADDRESS					
CITY	STATE		ZIP		
lay of <u>MARCH</u>	- XX 2001				(Seal)
					(Seal)
					(Seal)
STATE OF FLORIDA COUNTY OF MIAMI-DADE before me, a Notary Public authorized to personally appeared: ROBERT:	SS	nts in the State	and Cou	nty set forth a	ibove,
Quidis		DL#A530-73 F	3-64-4 orm of Ident		
Signature		F	orm of Ident	ification	
Signature Form of Identification					
thown to me and known to be the person(s) who executed the that executed the fithe above named person as indicated opposite.	ted the foregoing Articles of se articles of Incorporation, eeach name, and that an oa	f incorporation, wh that I relied upon th th was not taken.	o acknowled ne form	dged before of identification	on
NOTATRY RUBBER STAMP SEAL		nd official seal in th			
	Notary Signiture				

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT OF

ANIDO'S ENTERPRISES, 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 750 NW 43 AVE #404

MIAMI, FLORIDA 33126

has named ROBERTO M. ANIDO

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,

FORM 215: CERTIFICATE & ACKNOWLEDGEMENT REGISTERED AGENT

PAGE 3