

TRANSMITTAL LETTER

PO1000050517

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

SUBJECT:

C² PICTURES INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300004215893--8

-05/14/01--01131--008

*****70.00 *****70.00

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 of
Status

ADDITIONAL COPY REQUIRED

FROM:

DAVID A. CABANA

Name (Printed or typed)

15101 MEADOWHAVEN ST.

Address

DADE, FL 33331

City, State & Zip

(954) 680-3758

Daytime Telephone number

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

FILED
01 MAY 14 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7 SMITH MAY 22 2001

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:

C2 Pictures, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

15101 Meadhaven St.
Davie, FL 33331

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Film and television programming development and production

ARTICLE IV SHARES

The number of shares of stock is:

300 shares of common stock, no par value

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

David A. Cabana, 15101 Meadhaven St., Davie, FL 33331
Anthony Foy, 520 N. Andrews Ave., Ft. Lauderdale, FL 33301
Phillip Reusch, 520 N. Andrews Ave., Ft. Lauderdale, FL 33301

ARTICLE VI REGISTERED AGENT

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

David A. Cabana
15101 Meadhaven St.
Davie, FL 33331

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

David A. Cabana
C2 Pictures, Inc.
15101 Meadhaven St.
Davie, FL 33331

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

David A. Cabana
Signature/Registered Agent

5/1/01

Date

David A. Cabana
Signature/Incorporator

5/1/01

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA