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TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. BOX 6327
TALLAHASSEE, FL 32314

300004336003--8

-05/31/01--01059--004

*****78.75 *****78.75

IBRAHIM COMPOSITE INC.

SUBJECT: _____
(PROPOSED CORPORATE NAME- MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.75
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

FROM: _____
Name (Printed or typed)

AHM A HOQUE

905 KOKOMO KEY LANE

Address

DELRAY BEACH. FLORIDA 33483.

City, State & Zip

561- 272 8065

Daytime Telephone number

FILED
01 MAY 31 PM 12:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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ARTICAL OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607 AND/ OR CHAPTER 621, F.S. (PROFIT)

ARTICLE I NAME

THE NAME OF CORPORATION SHALL BE:

IBRAHIM COMPOSITE INC.

ARTICLE II PRICIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

905 KOKOMO KEY LANE. DELRAY BEACH. FL 33483.

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED IS:

REPAIR & ALTERATION ONLY ORIENTAL RUG.

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:

ONE HUNDRED.

ARTICLE V INITIAL OFFICERS/DIRECTORS(OPTIONAL)

THE NAME (S) AND ADDRESS(ES):

**AHM A HOQUE. RABYA HOQUE.
905 KOKOMO KEY LANE. DELRAY BEACH. FL 33483.**

ARTICLE VI REGISTERED AGENT

THE NAME AND FLORIDA STREET ADDRESS OF THE REGISTERED AGENT IS:

**AHM A HOQUE
905 KOKOMO KEY LANE, DELRAY BEACH. FL 33483**

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

**IBRAHIM COMPOSITE INC.
30 SE 4TH STREET, DELRAY BEACH. FL 33444**

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 famillar with and accept the appointment as registered agent and agree to act in this capacity



SIGNATURE/REGISTERED AGENT

05-27-01

DATE



SIGNATURE/INCORPORATOR

05-27-01

DATE

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 MAY 31 PM 12:48

FILED