

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87th AVENUE
MIAMI, FLORIDA (305) 552-5973
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

200004672522--0
-11/08/01--01051--014
****157.50 *****78.75

1. ENSEP Inc
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

AMENDMENTS

☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☒ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

****157.50 *****78.75

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

November 8, 2001

LAZARUS

MIAMI, FL

SUBJECT: ENSER INC.
Ref. Number: W01000025774

We have received your document for ENSER INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of 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 (850) 245-6934.

Loria Poole
Corporate Specialist
New Filings Section

Letter Number: 001A00060741

RECEIVED
01 NOV -9 PM 2:50
DIVISION OF CORPORATION

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.

FILED
01 NOV -9 PM 3:02
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

ENSER USA INC.

ARTICLE II PRINCIPAL OFFICE

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

10773 NW 58 St. # 356

MIAMI, FL. 33178

ARTICLE III SHARES

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

500 Shares @ \$1.00 par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

EUGENIO CRESPO
10773 NW 58 St. # 356
MIAMI, FL. 33178

ARTICLE V OFFICERS

The initial officer will be

EDUARDO NACHER
10773 NW 58 St. # 356
MIAMI, FL. 33178
(305) 915 5985

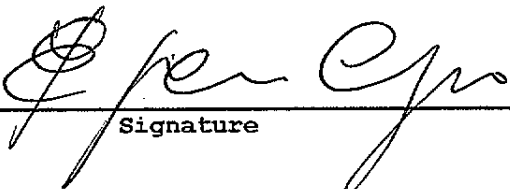
President

ARTICLE VI INCORPORATORS)

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

Eugenio Crespo
10773 NW 58 St. # 356
MIAMI, FL. 33178
(305) 915 5985

The undersigned incorporator(s) has (Have) executed these Articles of Incorporation this day of 20



Signature

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 SATE OF FLORIDA.

1 The name of the corporation is ENSER USA INC.

10773 NW 58 St. # 356
MIAMI, FL. 33178

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

EUGENIO CRESPO

Name

10773 NW 58 St. # 356

(P.O. Box or Mail Drop NOT acceptable)

MIAMI FL. 33178

(City/State/Zip)

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)

(DATE)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 23214

FILED
01 NOV -9 PM 3:02
SECRETARY OF STATE
TALLAHASSEE FLORIDA