# PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

| REINSTATEMENT  | Secretary of State DIVISION OF CORPORATIONS   | SECRETARY OF STATE TALLAHASSEE, FLORIDA   |
|--|---|---|
| DOCUMENT # POADO<br>1. Corporation Name<br>Perexx Corp.  | 00053398  | 17 That is  |
|  |   | EINSTATEMENT 03-04  |
| 2. Principal Office Address  3455 NE 13 <sup>th</sup> Terr  Suite, Apt. #, etc.  | 3. Mailing Office Address Po Box 10133 Suite, Apt. #, etc.  | 200027404452<br>01/22/0401023021 ***308.75<br>4. Date Incorporated or Qualified<br>To Do Business in Florida 5 1 6 1 6 1                                      |
| City & State  Da Kland Park 71  Zip Country  333341 USA  | City & State  71. Landerdale 71  Zip Country  33327 USA   | 5. FEI Number Applied For  11 - 20 + 30 2 Not Applicable  6. CERTIFICATE OF STATUS DESIRED Status  \$8.75 Additional Fee required for a Certificate of Status |
| 7. Name and Address of Current Registered Agent  |   |   |
| Street Address (P.O. Box Number is N. Suite, Apt. #, Etc.  | Hereira<br>Jand Street  Hark  | State Zip Code FL 33334   |
| Signature of Registered Agent  | ove named corporation, am familiar with and accept the control of | Date/ 15 0 4  |
| 9. Names and Street Addresses of Each Officer ar   | d/or Director (Florida nonprofit corporations must list at le   |   |
| Titles Name of Officers and/or Directors   | Street Address of Eac<br>Officer and/or Director  |   |
| Pres Christian Per   | eira 1951 DE 39ng   | St Cakland Hork, 71333  |
| Vice Pros. Apria Pereira   | 1251 NF 324   | St Oakland tack Iloso   |
|  |   |   |
|  |   |   |
| 10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. |   |   |
| SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #   |   |   |

# ARTICLES OF INCORPORATION OF

#### PEREXX CORP:

The undersigned Incorporator subscribing to these Articles of Incorporation subscribing to these Articles of Incorporation, a person competent to contract, hereby forms a corporation for profit under the laws of the State of Florida.

#### ARTICLE I - NAME

The name of the corporation is: PEREXX CORP

#### ARTICLE II - NATURE OF BUSINESS

The Corporation may engage in any activities or business permitted under the laws of the United States and the State of Florida.

#### ARTICLE III - CAPITAL STOCK

The maximum number of shares that this corporation is authorized to have outstanding at any one time is 100 shares of common stock each share having One Dollar (\$1.00) par value. The consideration to be paid for each share shall be fixed by the Board of Directors from time to time.

# ARTICLE IV - INITIAL CAPITAL

The amount of capital with which this Corporation will begin business is One Hundred Dollars.

## ARTICLE V - TERM OF EXISTENCE

This Corporation shall have perpetual existence.

### ARTICLE VI. - ADDRESS

The initial address of the principal office of the Corporation is to be at: 1501 Harrison Street, Hollywood, FL 33020. The Board of Directors may, from time to time, move the principal office to any other location or address in Florida.

## ARTICLE VII - DIRECTORS

The Corporation initially shall have one director. The number of directors may be decreased or increased from time to time by the Bylaws adopted by the Board of Directors of the Corporation.

ARTICLE VIII - INITIAL DIRECTORS AND OFFICERS

OMM IS M. 8.35

Florida Department of State Secretary of State Division of Corporations

To Whom It May Concern:

Enclosed you will find the Corporation Reinstatement Form along with a check in the amount of \$308.75 for 2003, 2004 and a Certificate of Status. I am requesting that the reinstatement fee of \$600.00 be waived due to the address typed incorrectly in the Articles of Incorporation. I have also enclosed a copy and highlighted the error in the Articles of Incorporation for your review. Thank you for your consideration in this matter.

Sincerely,

Nora Pereira Vice-President