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OFFICE USE ONLY(DOCUMENT #) LAZARUS CORPORATE FILING SERVICE 3320 S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973 TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Document #1 2. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 2.60 Certified Copy Will wait Certificate of Status Mail out Photocopy AMENDMENTS NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FUNGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials

CR2E031/9/92)



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

November 8, 2002

**LAZARUS** 

San San San

SUBJECT: SALE CORP.

Ref. Number: W02000032188

We have received your document for SALE CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

### 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) 245-6067.

Neysa Culligan Document Specialist New Filing Section

Letter Number: 002A00061183

### 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.

ARTICLE I - NAME

The name of the corporation shall be:

BEOGRAD CORP.

OZ NOV 12 PH 12: 04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

### ARTICLE II - PRINCIPAL OFFICE

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

737 JEFFERSON AVE, Suite 201 Miami Beach FL 33139

## **ARTICLE III - SHARES**

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

100 (hundered)

# ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ALEKSANDAR STOJANOVIC 737 JEFFERSON Ave #201 Miami BEACH, FL 33139

# ARTICLE V - INCORPORATOR

| The name and street address of the incorporator to these Articles of   |
|--|
| Incorporation is: 737 JEFFERSON AVE # 201  |
| STOJANOVIC MIAMI BEACH FC 33139  |
| The undersigned incorporator has executed these Articles of Incorporation this DF day of No S 2002  Signature  Signature  The undersigned incorporator has executed these Articles of 2002  SECRETARY OF THE D   |
| ARTICLE VI- DIRECTOR(S)  |
| The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):   |
| ALEKSANDAR STOJAHOĐIC, (PRESIDENT) SASA DESNICA, SERRETARY (TRESAURE)  |
| SASA DESNICA, SERRETARY (TRESAURE)   |
| PREDRAG DANILOVIC, (VICE PRESIDENT)  |
| 737 DEFFERSON Ave 201  |
| MIAMI BEACH FL 33139   |
| CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE   |
| Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent. |

Registered Agent Signature