

PO3000037647

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

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

SUBJECT: Szanna Corp  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: \_\_\_\_\_

Name (Printed or typed)  
**LES GARDI, CPA**  
**7061 S. TAMiami TRAIL**  
**SARASOTA, FL 34231-5559**  
Address  
**(941) 925-2099**

\_\_\_\_\_  
City, State & Zip

\_\_\_\_\_  
Daytime Telephone number

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

## 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:

*Szanna Corp.*

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*7061c S Tamiami Trail Sarasota FL 34231*

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*Internet Web Advertising*

### ARTICLE IV SHARES

The number of shares of stock is:

*1000*

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

### ARTICLE VI REGISTERED AGENT

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

**LES GARDI, CPA  
7061 S. TAMIAM Trail  
SARASOTA, FL. 34231-5559  
(941) 925-2099**

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Anna Szenasi  
7061c S. Tamiami Trail  
Sarasota FL 34231*

\*\*\*\*\*  
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

*[Signature]*

Signature/Registered Agent

*3/26/03*

Date

*[Signature]*

Signature/Incorporator

*3/26/03*

Date

FILED  
03 MAR 31 AM 11:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA