

P03000047328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

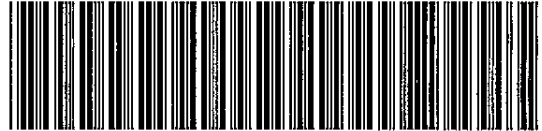
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE FLORIDA
STATE DIVISION OF CONSUMER PROTECTION
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03 APR 29 AM 9:55

4/29/03

**CORPORATE
ACCESS,
INC.**

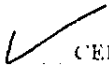
236 East 6th Avenue Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 Fax (850) 222-1666

WALK IN

PICK UP H-29-03 Kelly

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Arts

1) ABZ Color Correction, Corp
(CORPORATE NAME & DOCUMENT #)

2) _____
(CORPORATE NAME & DOCUMENT #)

3) _____
(CORPORATE NAME & DOCUMENT #)

4) _____
(CORPORATE NAME & DOCUMENT #)

5) _____
(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS

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:

ABZ COLOR CORRECTION, CORP

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9715 W BROWARD BLVD # 329 PLANTATION, FL. 33324

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation is organizaed to engage in any activity or business permitted under the laws of the United Sates and Florida

ARTICLE IV SHARES

The number of shares of stock is:

100 shares per US \$ 10.00 each

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

PRESIDENT : LUIS ANGEL RODRIGUEZ 9715 W BROWARD BLVD. # 329
PLANTATION, FL. 33324

VICEPRESIDENT : BEATRIZ E. ANDRADE 9715 W. BROWARD BLVD # 329
PLANTATION, FL. 33324

ARTICLE VI REGISTERED AGENT

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

LUIS ANGEL RODRIGUEZ 9715 W BROWARD BLVD. # 329 PLANTATION, FL. 33324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LUIS ANGEL RODRIGUEZ 9715 W BROWARD BLVD # 329 PLANTATION, FL. 33324

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/Registered Agent

Signature/Incorporator

Date

Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

04/23/03

04/23/03.