

PO3000067620

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

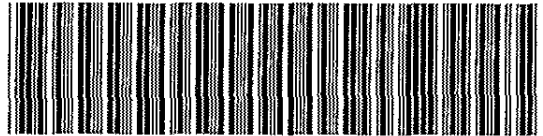
(Business Entity Name)

(Document Number)

Certified Copies ☒ Certificates of Status ☐

Special Instructions to Filing Officer:

Office Use Only



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06/18/03--01040--013 **78.75

RECEIVED
03 JUN 18 AM 10:51
STATE
CORPORATIONS
DIVISION
TALLAHASSEE, FLORIDA

FILED
03 JUN 18 PM 1:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6-18-03
[Signature]

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):

1. BABE BARUQUE BEAUTY WHOLE SALE IN
(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	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

THE NAME OF THE CORPORATION SHALL BE:

BABE BARUQUE BEAUTY WHOLE SALE INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS
CORPORATION SHALL BE:

666 N.W. 114 AVE. APT. 201

MIAMI, FLORIDA 33172

ARTICLE III SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS
AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

100 SHARE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS:

EDMOND A. BARUQUE

666 N.W. 114 AVE. APT. 201

MIAMI FL. 33172

ARTICLE V INCORPORATOR(R)

THE NAMES AND STREET ADDRESS(ES) OF THE INCORPORATOR(S) TO THESE
ARTICLES OF INCORPORATION IS (ARE):

EDMOND ALBERTO BARUQUE (AGENT) & (PRESIDENT)

NANCY CANON (VICE-PRESIDENT)

666 N.W. 114 AVE. APT. 201
MIAMI, FLORIDA 33172

ARTICLE VI DIRECTOR(S)

THE NAME(S) AND STREET ADDRESS(ES) OF THE DIRECTOR(S) TO THESE
ARTICLES OF INCORPORATION IS (ARE):

EDMOND ALBERTO BARUQUE (PRESIDENT) & (AGENT)

NANCY CANON (VICE-PRESIDENT)

666 N.W. 114 AVE. APT. 201
MIAMI, FLORIDA 33172

THE UNDERSIGNED INCORPORATOR(S) HAS (HAVE) EXECUTED THESE
ARTICLES OF INCORPORATION THIS 13 DAY OF MAY 2003


SIGNATURE


SIGNATURE

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

PERSUANT TO THE PROVISIONS OF SECTIONS 607.0501 OR 617.0501,
FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED
UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLO-
WING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/
REGISTERED AGEN, IN THE STATE OF FLORIDA.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THE NAME OF THE CORPORATION IS:

BABE BARUQUE BEAUTY WHOLE SALE INC.

THE NAMES AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

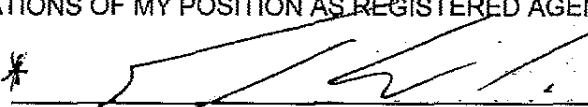
NAME: EDMOND ALBERTO BARUQUE

ADDRESS 666 N.W. 114 AVE. APT. 201

CITY, STATE, ZIP MIAMI, FLORIDA 33172

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF
PROCESS FOR THE ABOVE STATE 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 PERTAINING TO THE PROPER AND
COMPLETE PERFORMANCE OF MY DUTIE, AND I AM FAMILIAR WITH AND ACCEPT
THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT

SIGNATURE



DATE: MAY 13, 2003