

FROM : M.A.V. CORPORATE SERVICE  
of Corporation

FAX NO. : (954) 966-5273

JUL 23 11:23 AM

**P030000080480**

**Florida Department of State  
Division of Corporations  
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**((H03000238007 6)))**

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**To:**  
Division of Corporations  
Fax Number : (850) 205-0381

**From:**  
Account Name : M.A.V. CORPORATE SERVICES  
Account Number : I20000000007  
Phone : (954) 989-4530  
Fax Number : (954) 966-5273

**FLORIDA PROFIT CORPORATION OR P.A.**

**NITROZONE PERFORMANCE CORP.**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

**FILED**

**03 JUL 22 AM 9:03**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

*✓*  
**7/23/0**

FROM :MAU CORPORATE SERVICES

FAX NO. :954-966-5273

Jul. 22 2003 11:27AM P3

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**ARTICLES OF INCORPORATION**

03 JUL 22 AM 9:03

**OF**

**NITROZONE PERFORMANCE CORP.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

**ARTICLE I NAME**

The name of the corporation shall be: **NITROZONE PERFORMANCE CORP.**

The principal place of business of this corporation shall be:

**7755 WEST 28 AVE BAY 11, HIALEAH FL 33016**

**ARTICLE II NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

**ARTICLE III CAPITAL STOCK**

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: **ONE HUNDRED ( 100 )**

**ARTICLE IV TERM OF EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE V OFFICERS DIRECTORS**

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

**GILBERTO FARINAS**

**10288 NW 130 ST  
HIALEAH GARDENS FL 33018-1136**

**ROSA M. FARINAS**

**10288 NW 130 ST  
HIALEAH GARDENS FL 33018-1136**

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(((H03000238007 6))) **ARTICLES VI INCORPORATOR(S)**

The name(s) and street address(es) of the Incorporator(s) to these articles of incorporation is(are):

GILBERTO FARINAS

10288 NW 130 ST

HIALEAH GARDENS

FL 33018-1136

ROSA M. FARINAS

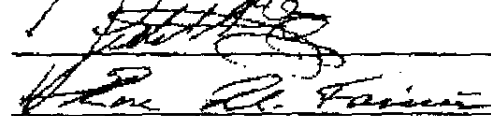
10288 NW 130 ST

HIALEAH GARDENS

FL 33018-1136

IN WITNESS WHEREOF, the undersigned incorporator(s) has have executed these Articles of Incorporation this 20 day of JULY 2003

Signature(s) of Incorporator(s)



STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

MIAMI-DADE

THE FOREGOING instrument was acknowledged and sworn to before me this 20 day of JULY 2003, by GILBERTO FARINAS and ROSA M. FARINAS  
(Name of Incorporator)

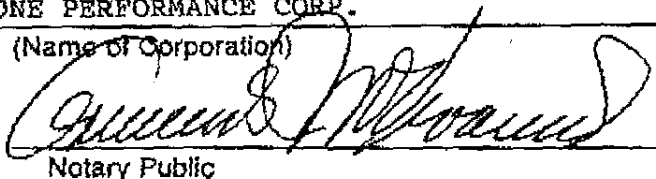
of NITROZONE PERFORMANCE CORP.

(Name of Corporation)

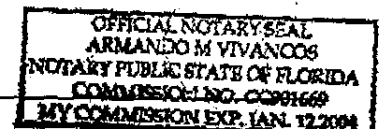
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OFFICIAL NOTARY SEAL  
ARMANDO M VIVANCO

  
Notary Public

My Commission Expires: \_\_\_\_\_



ARTICLES OF INCORPORATION

FROM :MAV CORPORATE SERVICES

FAX NO. :954-966-5273

Jul. 22 2003 11:27AM P2

((H03000238007 6)))

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

03 JUL 22 AM 9:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: NITROZONE PERFORMANCE CORP.
2. The name and address of the registered agent and office is:

GILBERTO FARINAS

(NAME)

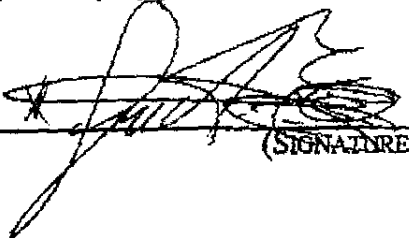
7755 WEST 28 AVE BAY 11

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

HIALEAH FL 33016

(CITY/STATE/ZIP)

*Having been named as registered agent and to accept service of process for the above stated 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(SIGNATURE)

07-20-2003

(DATE)

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