

PO3000091283

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

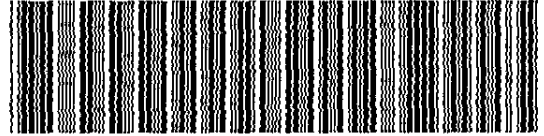
(Business Entity Name)

(Document Number)

Certified Copies 1 Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300022250993

08/20/03--01008--009 \*\*236.25

RECEIVED  
03 AUG 20 AM 10:28  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
03 AUG 20 PM 12:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8-20-03  
[Signature]

EXPRESS CORPORATE FILING SERVICE INC.  
Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101  
Address

CORAL GABLES, FL 33134 (305) 444-4994  
City/State/Zip Phone #

OFFICE USE ONLY

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. 5 Ares Seafood Inc.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in     Pick up time \_\_\_\_\_     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**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED  
03 AUG 20 PM 12: 58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:  
5 ACES SEAFOOD INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:  
717 PONCE DE LOEN BLVD. STE: 300  
CORAL GABLES, FL 33134

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
ANY AND ALL LAWFULL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is:  
SHARES: 100 @ \$1.00

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):  
ANGEL J. BORRERO (P/D)  
JUAN CARLOS BELLO (V/D)  
ARMANDO AMADOR (S/T)  
717 PONCE DE LOEN BLVD. STE: 300  
CORAL GABLES, FL 33134

**ARTICLE VI REGISTERED AGENT**

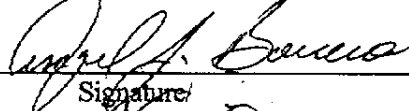
The name and Florida street address of the registered agent is:  
JUAN CARLOS BELLO  
717 PONCE DE LOEN BLVD. STE: 300  
CORAL GABLES, FL 33134

**ARTICLE VII INCORPORATOR**

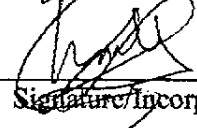
The name and address of the Incorporator is:  
ANGEL J. BORRERO  
JUAN CARLOS BELLO  
ARMANDO AMADOR  
717 PONCE DE LOEN BLVD. STE: 300, CORAL GABLES, FL 33134

\*\*\*\*\*

*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

08-19-03  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator - Registered Agent

08-19-03  
\_\_\_\_\_  
Date