

P03000107934

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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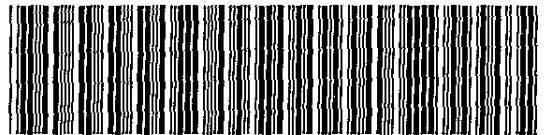
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

pm 10/1

TRANSMITTAL LETTER

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

SUBJECT: CARIBE Technology computer 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: NELSON FRAU
Name (Printed or typed)

4801 NW 7th Street APT 604-16
Address

MIAMI, FL 33126
City, State & Zip

(305) 448-4731
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:

CARIBE TECHNOLOGY COMPUTER CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4801 NW 7TH STREET APT 604-16 MIAMI, FL 33126

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A NEW PROFIT CORPORATION TO SERVE THE PUBLIC NEED ON TECHNOLOGY.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

PRESIDENT: NELSON FRAU

4801 NW 7TH STREET APT 604-16 MIAMI, FL 33126

ARTICLE VI REGISTERED AGENT

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

NELSON FRAU

4801 NW 7TH STREET APT 604-16 MIAMI, FL 33126

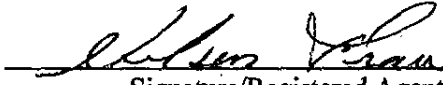
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

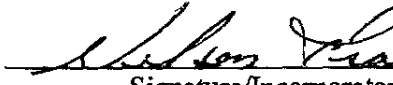
NELSON FRAU

4801 NW 7TH STREET APT 604-16 MIAMI, FL 33126

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

9-27-03
Date


Signature/Incorporator

9-27-03
Date

03 SEP 29 PM 3:09
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA