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TRANSMITTAL LETTER

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

SUBJECT: M.A.	M. COPERATION, INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	final and one (1) copy of the art	icles of incorporation and	a check for:
□ \$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: M	lichael Francis		
	Name	(Printed or typed)	
	6771 Lee Street		
	. '	Address	
	Hollywood, FL 33024		
	City	, State & Zip	
	(305)502-8281		
	Daytime '	Telephone number	

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 16, 2003

MICHAEL FRANCIS 6771 LEE ST HOLLYWOOD, FL 33024

SUBJECT: M.A.M. COPERATION, INC.

Ref. Number: W03000030087

We have received your document for M.A.M. COPERATION, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2004 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6884.

Letter Number: 303A00056635

Shawn Logan Document Specialist New Filings Section

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:

M.A.M. Corporation, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5700 Okeechobee Blvd. West Plam Beach, FL 33147

ARTICLE III *PURPOSE*

The purpose for which the corporation is organized is:

Retail Business

ARTICLE IV

The number of shares of stock is:

100 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Maged Beshai Akram Basta

5700 Okeechobee Blvd. W.P.B. FL 33147

5700 Okeechobee Blvd. W.P.B. FL 33147

Michael Francis

5700 Okeechobee Blvd. W.P.B. FL 33147

President Vice-President

Secretary

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> of the registered agent is:

Maher Malak 6771 Lee Street Hollywood, FL 33024

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Francis 5700 Okeechobee Blvd. West Palm Beach, FL 33147

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

10/21/03 Signature/Registered Agent Date

Michael Francis

Signature/Incorporator