P04000081674

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





300036285073

(6/21/04--01032--011 **87.50

TRANSMITTAL LETTER

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

SUBJECT: VALUE IMAGING PRODUCTS, 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 □ \$78.75 □ \$78.75

Filing Fee & Certificate of Statūs

Certificate of Statūs

□ \$78.75 ★ \$87.50

Filing Fee & Filing Fee, & Certified Copy & Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: JUAN E. ESQUIVEL

Name (Printed or typed)

9137 FONTAINE BLEAU BLVD - #1

Address

MIAMI, FL 33172

City, State & Zip

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)	FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE I NAME The name of the corporation shall be:	04 MAY 21 PM 4: 24
VALUE IMAGING PRODUCTS, CORP.	·
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	. –
9137 FONTAINE BLEAU BLVD #1 MIAMI FL 33172 ARTICLE III 'PURPOSE The purpose for which the corporation is organized is:	• - -
RETAIL SALES AND WHOLE SALE OF OFFICE	e-Products
ARTICLE IV SHARES The number of shares of stock is: /OOO	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): JUAN E. ESQUÍVEL -PRESIDENT TREA 9137 FONTAINE BLEAU BLVD#1 9137 MIAMÍ, FL 33172 MIAMÍ	LE REYES- ESQUIVEL- FONTAINE BLEAU BLVD I, FL 33172
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: JUAN E. ESQUIVEL 9137 FONTAINE BLEAU BLVD#1 MIAMI, FL 33172	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: JUAN E . ESQUIVEL 9137 FONTAINE BLEAU BLVD.*	- - -
MiAMI, FC 33172	*********
Having been named as registered agent to accept service of process for the above stated certificate, I am familiar with and accept the appointment as registered agent and agree to	corporation at the place designated in this act in this capacity

Signature/Registered Agent

Juan Comments
Signature/Incorporator