Po4000088814

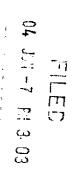
•
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





100037515661

06/07/04--01055--021 **87.50





TRANSMITTAL LETTER

JUNE 3, 2004,

DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314

SUBJECT: <u>M E B SALES, INC.</u> ENCLOSED IS AN ORIGINAL AND ONE COPY OF THE ARTICLES OF INCORPORATION AND A CHECK FOR \$87.50.

PLEASE INCORPORATE THE COMPANY.

THANKS YOU FOR YOUR ASSISTANCE.

FROM:

MARK BABINEC 5619 MCKINLEY ST. (HOUSE) HOLLYWOOD, FL 33021

ARTICLES OF INCORPORATION

OF

MEBSALES, INC.

THE UNDERSIGNED ACTING AS THE INCORPORATOR OF A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATIONS ACT, ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I

THE NAME OF THE CORPORATION SHALL BE:

MEBSALES, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

5619 McKinley St. (House) Hollywood, FL 33021

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED IS:

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND OF THE STATE OF FLORIDA.

ARTICLE IV SHARES

THE NUMBER OF SHARES OF CAPITAL STOCK IS:

ONE THOUSAND (1000) SHARES OF COMMON STOCK HAVING A PAR VALUE OF ONE (\$1) EACH

ARTICLE V INITIAL OFFICERS/DIRECTORS

THE NAME(S) AND ADDRESS(ES):

MARK BABINEC
DIRECTOR & PRESIDENT
5619 McKINLEY ST. (HOUSE)
HOLLYWOOD, FL 33021

LAURA BABINEC VICE PRESIDENT 5619 MCKINLEY ST (HOUSE) HOLLYWOOD, FL 33021

ARTICLE VI REGISTERED AGENT

THE NAME AND FLORIDA STREET ADDRESS OF THE REGISTERED AGENT IS:

MARK BABINEC 5619 McKINLEY ST (HOUSE) HOLLYWOOD, FL 33021

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

MARK BABINEC 5619 McKinley St. (House) HOLLYWOOD, FL 33021

HAVING BEEN NAMED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE NAMED 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

SIGNATURE / INCORPORATOR