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(Address)

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**Ming Quang Vuu**  
231 87<sup>th</sup> Avenue N.  
St. Petersburg, FL 33711

August 26, 2004

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

RE: **Incorporation of  
Sole Proprietorship Business**

Dear Sir or Madam:

Enclosed are an original and one (1) copy of the Articles of Incorporation to incorporate my sole proprietorship business as **MTGB, Inc.**

I have also enclosed my check in the amount of \$87.50 for the filing fee, certified copy, and certificate of status.

My address and phone number are shown below.

**Ming Quang Vuu**  
231 87<sup>th</sup> Avenue N.  
St. Petersburg, FL 33711  
(727) 578-7605

Please contact me if you need additional information.

Sincerely,



Ming Quang Vuu

Enclosures

## 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:  
**MTGB, INC.**

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:  
**231 87<sup>th</sup> Avenue N.  
St. Petersburg, Florida 33711**

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
**The purpose of this corporation is to engage in a restaurant business.**

### ARTICLE IV SHARES

The number of shares of stock is:  
**100 Shares Common Stock**

### ARTICLE V INITIAL OFFICERS/DIRECTORS

The names and addresses of the officers/directors are:  
**Ming Quang Vuu  
231 87<sup>th</sup> Avenue N.  
St. Petersburg, Florida 33711**

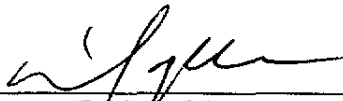
### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent are:  
**Ming Quang Vuu  
231 87<sup>th</sup> Avenue N.  
St. Petersburg, Florida 33711**


### ARTICLE VII INCORPORATOR

The name and address of the incorporator are:  
**Ming Quang Vuu  
231 87<sup>th</sup> Avenue N.  
St. Petersburg, Florida 33711**

*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

9/8/04  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

9/8/04  
\_\_\_\_\_  
Date

FILED  
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STATE OF FLORIDA  
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