

P04000146071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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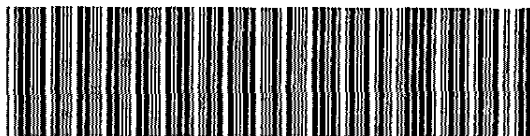
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10.25.04
3

TRANSMITTAL LETTER

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

SUBJECT: Cyber Space Cafe Inc

(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: Donald K Reigner

Name (Printed or typed)

10761 N Preserve Way Apt 208

Address

Miramar FL 33025

City, State & Zip

954-885-0453

-- 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:

Cyber Space Cafe Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9873 Pines Blvd Pembroke Pines Fl 33024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

internet cafe and computer sales and service

ARTICLE IV SHARES

The number of shares of stock is:

1000 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Donald K Reigner 10761 N Preserve Way Apt 208 Miramar Fl 33025 President

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

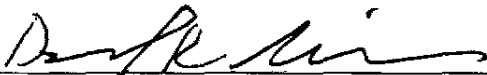
Donald K Reigner 10761 N Preserve Way Apt 208 Miramar Fl 33025

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Donald K Reigner 10761 N Preserve Way Apt 208 Miramar Fl 33025

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

10/20/04

Date



Signature/Incorporator

10/20/04

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA