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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694

Fax Number : (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

bronx dade productions, inc.

| State Series of the content of the Series of | the Charles of the Billians of the State of the Charles |
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| 6 | ARTICLES OF INCORPORATION | 1370 |
|---|---|---|
| (4) | of | |
| Brown | x Dade Productions, I | <u>~C,</u> |
| The undersigned subscriber(s) to the corporation under the laws of the S | these Articles of Incorporation, natural person(s) competent State of Florida. | to contract, hereby form a |
| The name of the corporation is: | ARTICLE I CORPORATE NAME | , Inc. |
| | ARTICLE II - DURATION | |
| This corporation shall exist perpet | ually unless dissolved according to Florida law. | (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) |
| | ARTICLE III - PURPOSE | A FLOW OF |
| The corporation is organized for th United States and the State of Flori | ne purpose of engaging in any activities or business permitt ida. | ed under the laws of the |
| | ARTICLE IV- CAPITAL STOCK | |
| | sueshares (DNE) of r value Common Stock, which shall be designated "Commo | |
| ART | TICLE V - INITIAL REGISTERED OFFICE AND AGENT | |
| The street address of the Initial Reg | gistered Agent office and the name of the Initial Registered | Agent at that office is: |
| NAME SOON P | Manaina S | |
| ADDRESS 17201 NW | 32nd AdE | |
| CITY MIGALL | FLORIDA | 200 BOSL |
| The principal office, if known, or th | he mailing address of the corporation is: | |

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FLORIDA

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| ARTICLE | VI - INITIAL BOARD OF DIRECTORS | |
|--|---|---|
| This corporation shall have OCC_increased or diminished from time to time by of the initial director(s) of the corporation are | directors initially. The number of d the By-Laws, but shall never be less than one (1). The as follows: | irectors may be either e names and addresses |
| NAME SOOD MOOR | ing | |
| | AUE J | |
| ary Miami | STATE T | SIP BY ST |
| NAME | | |
| ADDRESS | | |
| CITY | STATE | ZIP |
| NAME | | |
| ADDRESS | | |
| спү | STATE | ZIP |
| | | |
| AR | TICLE VI I - INCORPORATORS | |
| The names and addresses of the incorporators | signing these Articles of Incorporation are as follows | : |
| NAME SOCIO MODDINOS | | |
| ADDRESS 17201 NW 3210 | AVE | |
| CITY COLOGIA | STATE P | zar 3305/ |
| NAME | | |
| ADDRESS | | |
| CITY | STATE | ZIF |
| NAME | | |
| ADDRESS | | |
| CITY | STATE | ZIP |
| | | |
| IN WITNESS WHEREOF the understaned cut | oscriber(s) have executed these Articles of Incorporat | tion this 2 |
| day of January JMS | () | non tais |
|) | X m | |
| | Dona Manningo | (Seal) |
| | | (Seal) |

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_(Seal)

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CERTIFICATE AND KNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

| Bronx Dade Productions, Inc. | | |
|--|----------------------------|---|
| Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation at 17201 000 3224 AUE miami, Fl 33056 | 7 (20 S.71) 2 (20 S.71) | 3 - 21 - 61 - 6 - 1 - |
| has named <u>Social Mannings</u> located at the aforesaid address, as its Registered Agent to accept service of process with this state. | — hin | |

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position. I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(regisierea ageni)

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