

P05000067696

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

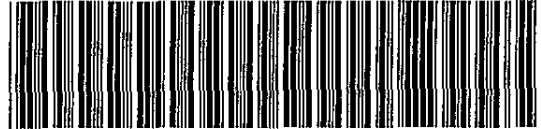
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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05/05/05--01035--008 \*\*78.75

FILED  
05 MAY -5 AM 9:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C.F. 517

**TRANSMITTAL LETTER**

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

SUBJECT: FUENTES GUARNIZO INVESTMENTS 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: AMERICAN'S BRAKES  
Name (Printed or typed)

4970 SW. 52 STREET. UNIT #311.  
Address

DAVIE FL 33314  
City, State & Zip

04/25/05 954-584-9831  
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)

05 MAY -5 AM 8:24  
FILED  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

FUENTES GUARNIZO INVESTMENTS INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

4970 SW 52 STREET, UNIT #311, DAVIE FL 3331

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

FOR ALL THE ACTIVITIES ALLOWED BY THE LAW OF THE STATE

**ARTICLE IV SHARES**

The number of shares of stock is:

1000 SHARES OF STOCK, PRICE \$1.00

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

PAULO FUENTES, 7400 STIRLING RD. #1724, HOLLYWOOD FL 33024  
TITLE: DIRECTOR.

CARLOS GUARNIZO, 221 NW 77 WAY, PEMBROKE PINES FL 33024  
TITLE: DIRECTOR

**ARTICLE VI REGISTERED AGENT**

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

PAULO FUENTES  
7400 STIRLING RD. #1724, HOLLYWOOD FL 33024

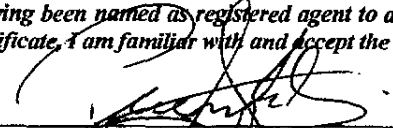
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

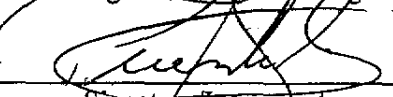
PAULO FUENTES  
7400 STIRLING RD. #1724, HOLLYWOOD FL 33024

\*\*\*\*\*

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

04/25/05  
\_\_\_\_\_  
Date

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

04/25/05  
\_\_\_\_\_  
Date