

P05000072186

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/29/05--01010--016 **78.75

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05 MAY 17 AM 7:50
TALLAHASSEE, FLORIDA
SLOAN COUNTY STATE

5/18/05 BWK

WDS-23185

TRANSMITTAL LETTER

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

SUBJECT: FESTIVAL OF INDEPENDENCE OF THE DOMINICAN REPUBLIC, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: ORLANDO PEREZ

Name (Printed or typed)

108 BUENAVENTURA BLVD

Address

KISSIMMEE, FL. 34744

City, State & Zip

407/344-7464

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 9, 2005

RECEIVED

05 MAY 17 AM 10:35

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ORLANDO PEREZ
108 BUENAVENTURA BLVD
KISSIMMEE, FL 34744

SUBJECT: FESTIVAL DE INDEPENDENCIA DE LA REPUBLICA
DOMINICANA, INC. ENGLISH TRANS: FESTIVAL OF INDEPENDENCE OF
THE DOMINICAN REP
Ref. Number: W05000023185

We have received your document for FESTIVAL DE INDEPENDENCIA DE LA
REPUBLICA DOMINICANA, INC. ENGLISH TRANS: FESTIVAL OF
INDEPENDENCE OF THE DOMINICAN REP and your check(s) totaling \$78.75.
However, the enclosed document has not been filed and is being returned for the
following correction(s):

Please take out either the Spanish or the English version of your corporate
name.

Please return the original and one copy of your document, along with a copy of
this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call
(850) 245-6840.

Bruce W Kitchens
Document Specialist
New Filings Section

Letter Number: 705A00032959

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:

FESTIVAL DE INDEPENDENCIA DE LA REPUBLICA DOMINICANA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

162 CHERRYWOOD CT.
KISSIMMEE, FL. 34743

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
FOR ANY AND ALL LEGAL USE.

ARTICLE IV SHARES

The number of shares of stock is:
1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MIGUEL LIMA-PRESIDENT
162 CHERRYWOOD CT.
KISSIMMEE, FL. 34743

HIPOLITO ABREU - *Vice Pres*
11403 CARDIFF DR
ORLANDO, FL. 32837

JORGE MILLAN - *Secretary*
1160 PALMER DR.
ORLANDO, FL. 32805

ARTICLE VI REGISTERED AGENT

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

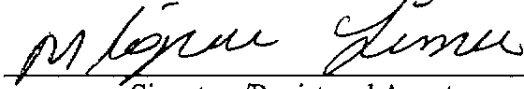
MIGUEL LIMA
162 CHERRYWOOD CT.
KISSIMMEE, FL. 34743

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MIGUEL LIMA
162 CHERRYWOOD CT.
KISSIMMEE, FL. 34743

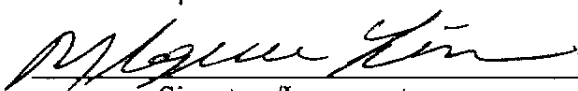
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

4-27-05

Date



Signature/Incorporator

4-27-05

Date

FILED
05 MAY 17 AM 7:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA