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J. Shines JAN 05 July

TRANSMITTAL LETTER

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

\$70.00

Filing Fee

\$78.75

Filing Fee

& Certificate of Status

SUBJECT: SAVE-ON CABINETS INC.

(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

ADDITIONAL COPY REQUIRED	
FROM:	NOT 50
2223 ROSE LANE	TARY OF OTRE
CLEARWATER, FL 33764	3: 2F
(727) 22 4 1999 Daytime Telephone number	÷

\$78.75

Filing Fee

& Certified Copy

\$87.50

Status

Filing Fee,

Certified Copy & Certificate of

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

The name of the corporation shall be:
SAVE-ON CABINETS, INC.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 2223 ROSE CANE, Clearwater, FL 3374
ARTICLE III PURPOSE The purpose for which the corporation is organized is:
Cabinets Installation
ARTICLE IV SHARES The number of shares of stock is:
10,000
List name(s), address(es) and specific title(s):
1 BRAHIM MULLAH 2223 Rose Cane Clearnater, FL 33764
PRESIDENT
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: IBRAHIM MULLIAN 2223 Rose LAME Clearwater, PL 33764
ARTICLE VII INCORPORATOR
The <u>name and address</u> of the Incorporator is: BRAHIM MULLAI+
2223 Rose Cane, Clearwater, FL 33764

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 Date
Signature/Incorporator Date

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)