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JUN 30 2005

# TRANSMITTAL LETTER

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

**SUBJECT:** MAREVA PROFESSIONAL SERVICES, 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:** MAREVA PROFESSIONAL SERVICES, INC.  
Name (Printed or typed)

5330 S.W. 6TH STREET  
Address

MIAMI, FLORIDA 33134  
City, State & Zip

(305) 774-9509  
Daytime Telephone number

05 JUN 30 PM 3:11

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

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 62I, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

MAREVA PROFESSIONAL SERVICES, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

5330 S.W. 6TH STREET  
MIAMI, FLORIDA 33134

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO RENDERED BOOKKEEPING, ACCOUNTING & TAX FILLING SERVICES.

**ARTICLE IV SHARES**

The number of shares of stock is:

TWO

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

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

MARIA T. BOTERO, 5330 S.W. 6TH STREET, MIAMI, FL. 33134, PRESIDENT  
EVA M. ABRAHAM, 5330 S.W. 6TH STREET, MIAMI, FL. 33134, VICE-PRESIDENT

**ARTICLE VI REGISTERED AGENT**

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

MARIA T. BOTERO, 5330 S.W. 6TH STREET, MIAMI, FLORIDA 33134

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

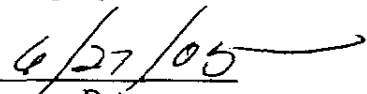
EVA M. ABRAHAM, 5330 S.W. 6TH STREET, MIAMI, FLORIDA 33134,

\*\*\*\*\*

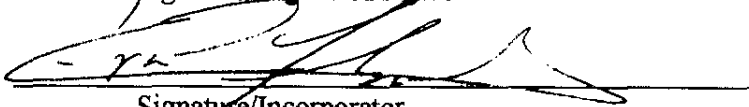
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



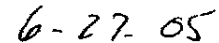
Signature/Registered Agent



Date



Signature/Incorporator



Date

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SECRETARY OF STATE