PO5000112463

(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:				
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 21, 2005

WINSTON VARGAS 6142 N.W. 115TH PLACE STE 324 MIAMI, FL 33178

SUBJECT: PERFECT FRAME PRODUCTIONS, INC.

Ref. Number: W05000034862

We have received your document for PERFECT FRAME PRODUCTIONS, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$78.75.

We are enclosing the proper form(s) with instructions for your convenience.

The corporate fees are as follows:

CORPORATIONS FILING FEES

Profit and NonProfit Florida & Foreign Corp.

Filing Fees	\$35.00
Registered Agent	
Designation	\$35.00
Certifed Copy	\$8.75
Certificate of Status	\$8.75

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) 245-6934.

Loria Poole Document Specialist New Filings Section

Letter Number: 105A00047907

TRANSMITTAL LETTER

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

SUBJECT:	PERFECT ?	MRAME PROD	UCTIONS IN
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee,
		ADDITIONAL CO	Status DPY REQUIRED
FROM:	WINS TON Name	VARGAS e (Printed or typed)	
	6142 N.	W 115 PLACE Address	#324
		F-1 33/2 , State & Zip	78
	Davtime:	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)

ARTICLE I NAME

The name of the corporation shall be:

PERFECT FRAME PRODUCTIONS INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

MIAMI - FLA - 33178

SE

rporation is organized is:

AD

-//ONS /NC

STE 324

RIANI
-//ONS /NC

RIANI

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS + AD PRODUCTIONS

ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

WINISTON VAREAS 6142 N.W 115 PLACE STE 324 MIAMI- F-A- 33178

ARTICLE VI REGISTERED AGENT

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

WINSTON VAREAS 6142 N.W 115 PLACE STE 324 MIAMI - FLA 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

WINSTON VAREAS 6142 N.W 115 PLACE STE 324 MIAMI, -FLA 33178.

Having been named as registered deept 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 Ag

08/08/05 Date