

FROM : (305) 639-4725
Division of Corporations

PHONE NUMBER : (305) 639-4725

FAX NUMBER : (305) 639-4725

Page 1 of 1

P05000161480

Florida Department of State
Division of Corporations
Public Access System

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To:
Division of Corporations
Fax Number : (850) 205-0381

From:
Account Name : PROFESSIONAL VISA, INC.
Account Number : I20020000173
Phone : (305) 639-4737
Fax Number : (305) 639-4725

CLERK OF STATE
TALLAHASSEE, FLORIDA

05 DEC -9 AM 10:50

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FLORIDA PROFIT CORPORATION OR P.A.

Latin Classics Productions, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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Corporate Filing

Public Access Help

FROM : (305) 639-4725

PHONE NO. : 3056394725

Dec. 09 2005 03:00AM P2

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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:

Latin Classics Productions, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4995 NW 72 Ave. Suite 205
Miami, Fl. 33166

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any or all lawful activities or business permitted under the laws of The United States, the State of Florida, or any others states, country, territory, or nation.

ARTICLE IV SHARES

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is five thousand shares at one dollar par value.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

President: Ruben Mora
4995 NW 72 Ave. Suite 205
Miami, Fl. 33166

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Ruben Mora
4995 NW 72 Ave. Suite 205
Miami, Fl. 33166

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TALLAHASSEE, FLORIDA

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FROM : (305) 639-4725

PHONE NO. : 3056394725

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((H05000280614 3)))

ARTICLE VII INCORPORATOR

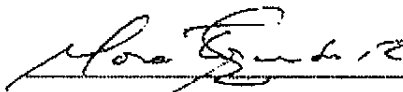
The name and address of the Incorporator is:

Ruben Mora
4995 NW 72 Ave. Suite 205
Miami, FL 33166

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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TALLAHASSEE, FLORIDA

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