

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:  
Division of Corporations  
Fax Number : (850) 617-6381

From:  
Account Name : FASTKIT CORP  
Account Number : I20100000009  
Phone : (305) 599-0839  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

FLORIDA PROFIT/NON PROFIT CORPORATION  
AKROTIRI CORP

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

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J. Shivers JAN 26 2011



January 21, 2011

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FASTKIT CORP

SUBJECT: AKROTIRI CORP  
REF: W11000004001

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The person designated as incorporator in the document and the person signing as incorporator must be the same.

If you have any further questions concerning your document, please call (850) 245-6962.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H11000017085  
Letter Number: 411A00001820

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TALLAHASSEE, FLORIDA

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

**ARTICLE I NAME** AKROTIRI CORP  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
8886 WEST FLAGLER ST #201  
MIAMI FL 33174

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
HEALTH SERVICES AND ALL OTHER ACTIVITIES PERMITTED BY THE LAW OF THE STATE  
OF FLORIDA AND THE UNITED STATES OF AMERICA

**ARTICLE IV SHARES**

The number of shares of stock is: 99 SHARES

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

Name and Title:	DAVID A CASTILLO P/D 33 SHARES	Name and Title:	
Address:	7747 SW 86 ST # D404 MIAMI FL 33143	Address:	

Name and Title:	MARIA G FURLAN S/D 33 SHARES	Name and Title:	
Address:	7747 SW 86 ST # D404 MIAMI FL 33143	Address:	

Name and Title:	ANNABELLA LOU T/D 33 SHARES	Name and Title:	
Address:	8886 WEST FLAGLER ST # 201 MIAMI FL 33174	Address:	

**ARTICLE VI REGISTERED AGENT**

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

Name: DAVID A CASTILLO  
Address: 8886 WEST FLAGLER ST # 201  
MIAMI FL 33174

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: DAVID A CASTILLO  
Address: 7747 SW 86 ST # D404  
MIAMI FL 33143

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

  
\_\_\_\_\_  
Required Signature/Registered Agent

01/20/2011  
\_\_\_\_\_  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

  
\_\_\_\_\_  
Required Signature/Incorporator

01/20/2011  
\_\_\_\_\_  
Date

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