

P11000014629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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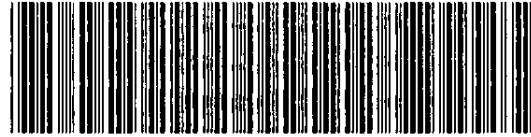
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2011 FEB 10 PM 1:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers FEB 11 2011

**COVER LETTER**

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

**SUBJECT: Capres, Corp**

(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: Teresita Drubi

Name (Printed or typed)

3310 NW 4th St

Address

Miami, FL 33125

City, State & Zip

305 305 1375

Daytime Telephone number

osvaldocesar@aol.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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: Capres, Corp

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
3310 NW 4th St  
Miami, FL 33125

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
purchase, sell, import, export, all kind of merchandise

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Teresita Drubi, Presidente, Vice pres, and Secret.	Name and Title: _____
Address: 3310 NW 4th St	Address: _____
Miami Florida 33125	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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

Name: Teresita Drubi  
Address: 3310 NW 4th St  
Miami, FL 33125

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Teresita Drubi  
Address: 3310 NW 4th St  
Miami, FL 33125

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

Teresita Drubi  
Required Signature/Registered Agent

02/07/11  
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.

Teresita Drubi  
Required Signature/Incorporator

02/07/11  
Date

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