

1/29/12

**P12000054640**  
Division of Corporations  
**Florida Department of State**

Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

**RECEIVED FEB 29 2012**

From:

Account Name : ACCOUNTING REVENUE SERVICE, INC.  
Account Number : I20110000041  
Phone : (305) 887-8730  
Fax Number : (305) 887-8744

**\*\*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**  
**CARIBBEAN MARINE SURVEY & SUPPLY, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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**COVER LETTER**

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

**SUBJECT: CARIBBEAN MARINE SURVEY & SUPPLY, 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: ALIEK R DE PABLOS VELEZ**

Name (Printed or typed)

17832 NW 63 CT

Address

MIAMI LAKES FL 33015

City, State & Zip

786 -343-0712

Daytime Telephone number

totalship@msn.com

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

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

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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:

**CARIBBEAN MARINE SURVEY & SUPPLY, INC**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

**17832 NW 63 CT  
MIAMI LAKES FL 33015**

Mailing address, if different is:

**17832 NW 63 CT  
MIAMI LAKES FL 33015**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**Any and all lawful business**

**ARTICLE IV SHARES**

The number of shares of stock is: **1000 SHARES AT \$1.00 PER VALUE**

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

Name and Title: **ALIEK R DE PABLOS VELEZ/ PRESIDENT** Name and Title: \_\_\_\_\_

Address: **17832 NW 63 CT  
MIAMI LAKES FL 33015** Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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

Name and Title: \_\_\_\_\_

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

Name and Title: \_\_\_\_\_

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

Name and Title: \_\_\_\_\_

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

**ARTICLE VI REGISTERED AGENT**

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

Name: **ALIEK R DE PABLOS VELEZ**  
Address: **17832 NW 63 CT  
MIAMI LAKES FL 33015**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **ALIEK R DE PABLOS VELEZ**  
Address: **17832 NW 63 CT  
MIAMI LAKES FL 33015**

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

**02/17/2012**

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

**02/17/2012**

Date

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February 21<sup>st</sup>, 2012


To whom it makes concern

Please be advised that the owners of the corporation CARIBBEAN MARINE SURVEY & SUPPLY, INC with the document number P08000072422 are the same as those who are opening this new corporation with the same name.

In Addition be advice that we have no intention of reinstating, therefore we are releasing the name.

Thank you.

Sincerely



President

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