

P12000034072

(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:

Office Use Only



000226971630

04/09/12--01025--002 \*\*70.75

FILED

2012 APR -9 AM 11:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers APR 10 2012

## COVER LETTER

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

SUBJECT: **HAE BROTHERS 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: **HECTOR CASTREJON**

Name (Printed or typed)

**6301 58 ST APT 1006**

Address

**PINELLAS, FL 33781**

City, State & Zip

**8134015939**

Daytime Telephone number

**HK\_CASTREJON@YAHOO.COM**

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

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

2012 APR -9 AM 11:14  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# ARTICLES OF INCORPORATION

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

## ARTICLE I NAME

HAE BROTHERS INC

The name of the corporation shall be:

## ARTICLE II PRINCIPAL OFFICE

Principal street address

2523 W. CHERRY ST APT B  
TAMPA, FL 33607

Mailing address, if different is:

2523 W. CHERRY ST APT B  
TAMPA, FL 33607

## 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

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: HECTOR CASTREJON - PRESIDENT

Address: 6301 58 S APT 1006  
PINELLAS PARK, FL 33781

Name and Title: ABEL CASTREJON JR. - VICE PRESIDENT

Address: 2523 W. CHERRY ST APT B  
TAMPA, FL 33607

Name and Title: JORGE SANABRIA - MANAGER

Address: 4733 W. WATER AVE APT 421  
TAMPA, FL 33614

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: HECTOR CASTREJON  
Address: 6301 58 ST APT 1006  
PINELLAS PARK, FL 33781

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: HECTOR CASTREJON  
Address: 6301 58 ST APT 1006  
PINELLAS PARK, FL 33781

FILED  
2012 APR -9 AM 11:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Hector Castrejon

Required Signature/Registered Agent

04/03/2012

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.

Hector Castrejon

Required Signature/Incorporator

04/03/2012

Date