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Date: Tuesday, January 24, 1995

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FLORIDA DIVISION OF CORPORATIONS

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ELECTRONIC FILING COVER SHEET

TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA
409 EAST GAINES STREET
TALLAHASSEE, FL 32399
FAX: (904) 922-4000

FROM: CORPORATE CREATIONS INTERNATIONAL, INC.
401 OCEAN DR
SUITE 312
MIAMI BEACH FL 33139-0000
CONTACT: JOSEPH C RODRIGUEZ
PHONE: (305) 672-0686
FAX: (305) 672-9110

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DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: GRUPO VERA ANDRUDE INC.

FAX AUDIT NUMBER: H95000000957

CURRENT STATUS: REQUESTED

DATE REQUESTED: 01/24/1995

TIME REQUESTED: 14:35:04

CERTIFIED COPIES: 0

CERTIFICATE OF STATUS: 1

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ENTER SELECTION AND <CR>:

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02/01/1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Morikumi
Secretary of State

January 25, 1995

CORPORATE CREATIONS INTERNATIONAL
401 OCEAN DRIVE STE. 312
MIAMI BEACH, FL 33139

SUBJECT: GRUPO VERA ANDRADE INC.
REF: W95000001746

ENGLISH TRANSLATION: GROUP VERA ANDRADE INC.
VERA ANDRADE ARE SURNAMES

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

Please provide an English translation for the entity's name in your cover letter.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6878.

Terri Buckley
Corporate Specialist

FAX Aud. #: H95000000957
Letter Number: 095800003124

Division of Corporations - P.O. Box 6327 - Tallahassee, Florida 32314

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Articles of Incorporation
of
Grupo Vera Andrade Inc.

Article I. Name

The name of this Florida corporation is Grupo Vera Andrade Inc.

Article II. Address

The mailing address of the Corporation is:

Grupo Vera Andrade Inc.
11250 SW 151st Court
Miami, FL 33196

Article III. Capital Stock

The Corporation shall have the authority to issue 2000 shares of common stock, par value \$.01 per share.

Article IV. Registered Agent

The name and address of the registered agent of the Corporation is:

Duarte-Viera & Rodriguez, P.A.
3211 Ponce De Leon Blvd., Suite 202
Coral Gables, FL 33134

Article V. Board of Directors

The affairs of the Corporation shall be managed by a Board of Directors consisting of no less than one director. The number of directors may be increased or decreased from time to time in accordance with the Bylaws of the Corporation. The election of directors shall be done in accordance with the

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Jose A. Rodriguez, Bar Member 989444
Duarte-Viera & Rodriguez, P.A.
3211 Ponce De Leon Blvd., Suite 202
Coral Gables, FL 33134
305-447-4676 • Fax 305-461-9881

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Bylaws. The directors shall be protected from personal liability to the fullest extent permitted by law. The name of each initial member of the Corporation's Board of Directors is:

Walter R. Vera
Ana Maria Vera

Article VI. Incorporator

The name and address of the incorporator is:

Duarte-Viera & Rodriguez, P.A.
3211 Ponce De Leon Blvd., Suite 202
Coral Gables, FL 33134

Article VII. Corporate Existence

The corporate existence of the Corporation shall begin effective as of January 24, 1995.

The undersigned incorporator executed these Articles of Incorporation on the date first set forth below.

Duarte-Viera & Rodriguez, P.A.

By: Jose A. Rodriguez /scr
Name: Jose A. Rodriguez
Title: Vice President

Date: JANUARY 24, 1995

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Jose A. Rodriguez, Bar Member 989444
Duarte-Viera & Rodriguez, P.A.
3211 Ponce De Leon Blvd., Suite 202
Coral Gables, FL 33134
305-447-4876 • Fax 305-461-9881

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

CORPORATION:
Grupo Vera Andrade Inc.

REGISTERED AGENT:
Duarte-Viera & Rodriguez, P.A.
3211 Ponce De Leon Blvd., Suite 202
Coral Gables, FL 33134

I agree to act as registered agent to accept service of process for the corporation named above at the place designated in this Certificate. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.

Duarte-Viera & Rodriguez, P.A.

By: Jose A. Rodriguez / vcr
Name: Jose A. Rodriguez
Title: Vice President

Date: JANUARY 24, 1995

Jose A. Rodriguez, Bar Member 989444
Duarte-Viera & Rodriguez, P.A.
3211 Ponce De Leon Blvd., Suite 202
Coral Gables, FL 33134
305-447-4676 • Fax 305-481-9881

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortlund
Secretary of State
DIVISION OF CORPORATIONS

AND
FILED

96 NOV 13 PM 12:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000006693

1. Corporation Name

Grupo Vera, Andrade, Inc.

Principal Place of Business

Mailing Address

500 Cloughton Island Dr.
Apt. 1801-1802
Miami, FL 33131

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

3. New Mailing Address, if Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT

9601

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

Applied For

Not Applicable

CERTIFICATE OF STATUS DESIGNATION

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
D/P/T	WALTER R. VERA	500 Cloughton Island Dr. Apt 1801-1802 Miami, FL 33131	Miami, FL 33131
D/S/V	Aracelia Vera	500 Cloughton Island Dr. Apt. 1801-1802 Miami, FL 33131	Miami, FL 33131

500002007325--5
11/13/96 01000 010
****375.00 ****375.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Jose A. Rodriguez, Esq.
777 Brickell Ave, Ste 950
Miami, FL 33131

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 10/11/96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐

(See other side for information
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director, the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR20940 (12/95)