

95000025507

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240 CRANDON BOULEVARD • SUITE 114
KEY BISCAYNE • MIAMI, FLORIDA 33149
(City, State, Zip) (Phone #)

OFFICE USE ONLY

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03/17/95 01018--006

4/20/75.75 4/20/75.75

2.00

25.00

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

- 1. (Corporation Name) (Document #)
2. (Corporation Name) (Document #)
3. (Corporation Name) (Document #)
4. (Corporation Name) (Document #)

- Walk in Pick up time Certified Copy
Mail out Will wait Photocopy Certificate of Status

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95 MAR 30 PM 1:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Support

Table with 2 columns: NEW FILINGS, Profit, NonProfit, Limited Liability, Domestication, Other

Table with 2 columns: AMENDMENTS, Amendment, Resignation of R.A., Officer/Director, Change of Registered Agent, Dissolution/Withdrawal, Merger

Table with 2 columns: OTHER FILINGS, Annual Report, Fictitious Name, Name Reservation

Table with 2 columns: REGISTRATION/QUALIFICATION, Foreign, Limited Partnership, Reinstatement, Trademark, Other

B. REGISTER MAR 20 1995

789,505,706,671
W95-6090

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 20, 1995

MARLENE S KAPLAN, ESQUIRE
240 GRANDON BLVD
SUITE 114
KEY BISCAVNE, FL 33149

SUBJECT: MAYRA VIDE-PEREZ CONSULTING
Ref. Number: W95000006090

We have received your document for **MAYRA VIDE-PEREZ CONSULTING** and your check(s) totaling \$75.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 487-6919.

Beth Register
Corporate Specialist Supervisor

Letter Number: 695A00012254

ARTICLES OF INCORPORATION
OF
MAYRA VIDE-PEREZ CONSULTING & DISTRIBUTING CORP.

The undersigned incorporator for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation

ARTICLE I - NAME

The name of the corporation shall be:

MAYRA VIDE-PEREZ CONSULTING & DISTRIBUTING CORP.
8121 S.W. 35th Terraces
Miami, Florida 33155

The principal place of business of this corporation shall be:

ARTICLE II - NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, in the State of Florida, or any other state, county, territory or nation.

ARTICLE III - CAPITAL STOCK

The aggregate number of share of stock and its par value that this corporation is authorized to have outstanding at any one time is

500 shares at \$1.00 par value

ARTICLE IV - TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V - OFFICERS DIRECTORS

The names and street addresses of the initial officers and director(s), if any, who shall hold the first year of the corporation's existence or until their successors are elected, are:

Mayra Vide-Perez, President/Officer/Director
Julian Perez/Vice President/Officer/Director
8121 S.W. 35th Terraces
Miami, Florida 33155

ARTICLE V - INCORPORATOR(S)

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**CERTIFICATE DESIGNATING
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: MAYRA VIDE-PEREZ CONSULTING & DISTRIBUTING CORP.
2. The name and address of the registered agent and office is:

MARLENE KAPLAN, P.A.
240 Crandon Blvd.
Suite 114
Key Biscayne, Florida 33149

SIGNATURE: _____

TITLE: REGISTERED AGENT

DATE: _____

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE: _____

(Registered Agent)

DATE: _____

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