

995000026010

FILED  
95 MAR 30 AM 8:41  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

000001444090  
-03/30/95--01079--007  
\*\*\*\*122.50 \*\*\*\*122.50



"The Small Business Specialists"

**National Processing Systems, Inc.**  
Bookkeeping - Consulting - Secretarial Services - Printing  
P.O. Box 650576  
Miami, FL 33265-0576

OFFICE USE ONLY

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

1. \_\_\_\_\_  
(Corporation Name) *Sigis Paper, Inc.* (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

NEW FILINGS	
Profit	
NonProfit	
Limited Liability	
Domestication	
Other	

AMENDMENTS	
Amendment	
Resignation of R.A., Officer/Director	
Change of Registered Agent	
Dissolution/Withdrawal	
Merger	

4/3/95  
*(Signature)*

OTHER FILINGS	
Annual Report	
Fictitious Name	
Name Reservation	

REGISTRATION/QUALIFICATION	
Foreign	
Limited Partnership	
Reinstatement	
Trademark	
Other	

Examiner's Initials \_\_\_\_\_

**ARTICLES OF INCORPORATION**  
**OF**  
*Gigi's Repair, Inc.*

FILED  
95 MAR 30 AM 8:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation hereby adopts the following Articles of Incorporation.

**ARTICLE I**

**CORPORATE NAME**

The name of this Corporation shall be: Gigi's Repair, Inc.

**ARTICLE II**

**NATURE OF CORPORATE BUSINESS**

This corporation may engage in any activity of business permitted under the laws of the United States and of the State of Florida.

**ARTICLE III**

**INITIAL CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 shares no par value common stock

**ARTICLE IV**

**DURATION OF CORPORATE EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE V**

**PRINCIPAL OFFICE AND INITIAL REGISTERED AGENT AND STREET ADDRESS**

The initial address of the Principal office of this corporation in the State of Florida is:

3541 NW 99<sup>TH</sup> Street, Miami, FL 33147.

The Board of Directors may from time to time move the principal office of this corporation to any other address in Florida. The registered agent of this corporation shall be:

**ONIMER L. GARCIA**

3541 NW 99<sup>th</sup> Street, Miami, FL 33147

**ARTICLE VI**

This corporation shall have one initial director. The number of directors may increase, from time to time, by by-laws adopted by the stockholders.

**ARTICLE VII**

**INCORPORATORS**

The name and addresses of the incorporators are as follows:

<u>NAME</u>	<u>ADDRESS</u>
ONIMER L. GARCIA	3541 NW 99 <sup>th</sup> Street, Miami, FL 33147

**ARTICLE VIII**

**PRE-EMPTIVE RIGHTS**

Should any stockholder wish to dispose of his stock it shall first be offered to the remaining stockholders, at a price no greater than a bona-fide offer by any third person, and shall be available for a period of ninety (90) days to such remaining stockholders. In the event that any of said stock is not purchased by any or all, then be sold by the stockholders at the price of the Bona-Fide offer of the third person.

**ARTICLE IX**

**AMENDMENT**

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the Stockholders and approved at a Stockholder's Meeting by a majority of the stockholders entitled to vote thereon, unless all Directors and the Stockholders sign a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be made.

**ARTICLE X**

The stock of the corporation may be issued pursuant to the provisions of Section 1244 of the Internal Revenue Code, so that the Stockholders of the corporation may receive the benefits provided thereunder

IN WITNESS WHEREOF, the undersigned incorporators have executed these Articles of Incorporation this 24<sup>th</sup> day of March, 1995.

Onimer L. Garcia  
ONIMER L. GARCIA

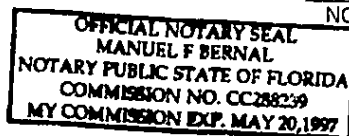
**STATE OF FLORIDA COUNTY OF DADE**

I heret y certify that on this day, before me, a Notary Public duly authorized in the State of Florida, County of Dade, named above, to take acknowledgments personally appeared before me the persons described as subscribers in, and who executed the foregoing Articles of Incorporation.

WITNESS my hand and official seal at Miami, Dade County, Florida, this 24<sup>th</sup> day of March, 1995.

Onimer L. Garcia  
ONIMER L. GARCIA

Manuel F. Bernal  
NOTARY PUBLIC STATE OF FLORIDA AT LARGE



CERTIFICATE AND ACKNOWLEDGMENT  
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT  
OF

GIGI'S REPAIR, INC.

95 MAR 30 AM 8:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation at 3541 NW 99 ST., MIAMI, FL 33147 has named ONIMER L. GARCIA, located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

  
ONIMER L. GARCIA

DATE: 3-24-95

P95000026010

STATE OF FLORIDA  
OFFICE OF THE COMPTROLLER  
APPLICATION FOR REFUND

Section 215.26, Florida Statutes, states in part: "Applications for refunds as provided in this section shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years is generally interpreted as meaning three years from the date of payment into the State treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section \_\_\_\_\_, Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury, which are subject to refund. The following information is submitted to substantiate the claim.

Name: ONIMER L. GARCIA EIN or SS#: \_\_\_\_\_

Address: 3541 NW 99th ST.  
Miami, FL. 33147

Amount: \$ 35.00 Date Paid \_\_\_\_\_

Reason for claim: Decided not File  
Gigi's Repair, Inc.  
P95000026010

Certified true and correct this 23 day of Sept., 19 96.

Signature [Signature]

\* Must be completed if authority is other than Section 215.26, Florida Statutes.

**For Agency Use Only**

Agency recommends approval of above claim and submits the following information to substantiate the claim. Amount of recommended refund \$35.00

The amount requested above was originally deposited into the Sta. Treasury, as a part of the funds deposited on State Treasurer's Receipt No. 01016 001 dated 8-26-96

Name of Account: 4520213000145300000000010000

Statutory Authority for Collection: 607.0122

It is requested that payment be made from the following account:

NAME OF ACCOUNT: 45202130001453000000022002000

Certified true and correct this \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_.

Department of State, Division of Corporations  
(Agency) \_\_\_\_\_ (Authorized Signature and Title)

LAZARUS CORPORATE INDUSTRIES, INC.  
Requestor's Name

890 S.W. 87 AVENUE SUITE:16  
Address

MIAMI, FL 33174 (305)552-5973  
City/State/Zip Phone #

LOCAL REPRESENTATIVE TALLAHASSE

800001931718  
-08/26/96--01016--001  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Office Use Only

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

1. GIGI'S REPAIR, INC.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in    
  Pick up time 2:08    
  Certified Copy  
 Mail out    
  Will wait    
  Photocopy    
  Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input checked="" type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED  
95 AUG 26 AM 10:40  
DIVISION OF CORPORATION

\*00789, 02 398