

P95000029401

OFFICE USE ONLY (Document #)

Comer Bank
 (Requestor's Name)
1211 NW 33 Ave
 (Address)
Miami FL 33135
 (City, State, Zip) (Phone #)

APR 14 1995
 STATE OF FLORIDA
 TALLAHASSEE

OFFICE USE ONLY

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

800001459238
 -04/18/95--01086--014
 ****122.50 ****122.50

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

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 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

Examiner's Initials _____

FILED
95 APR 14 PM 2:13
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

ARTICLE ONES

NAME

The name of this incorporation is:

GONZY ENTERPRISES CORP.

ARTICLE TWO

NATURE OF BUSINESS

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

ARTICLE THREE

DURATION

This incorporation shall have perpetual existence unless sooner dissolved in accordance with the laws of the State of Florida.- The date on which incorporate existence shall begin in: Date Of Filing

ARTICLE FOUR

CAPITAL STOCK

This incorporation is authorized to issue shares of stock as follows:

- A. Designation. The stock of this corporation of stock known as common stock.
- B. Authorized. The maximum number of shares of common stock that this incorporation may issue is: 100.

- C. Par Value: Each share of Common Stock shall have the par value of \$ 1.00 .
- D. Consideration Shares of Common Stock may be issued in exchange for cash, real property, labor or services rendered, or any combination of the foregoing. In the absence of fraud in the transaction, the judgment of the Board of the Directors as to the values of any such consideration shall be conclusive.
- E. Non-Assessability: Each share of Common Stock shall be issued in exchange of consideration which is at least equal to the par value thereof, and shall be fully paid and non-assessable.
- F. Voting Rights: Each share of Common Stock shall entitle the record holder thereof to one vote upon each proposal presented at meetings of the stock-holders of the incorporation.
- G. Dividends: Record holders of Common Stock are entitled in the event of pro-rata share of any dividends that may be declared by the Board of Directors out of assets legally available for such purpose.
- H. Liquidation rights: Holders of Common Stock are entitled in the event of liquidation or dissolution of this corporation, to receive their

pro-rat share of any assets of this
incorporation remaining after payment of
all corporate debts and obligations.

ARTICLE FIVE

INITIAL REGISTERED OFFICE AND AGENT.

The street address of the Initial ^{Principal} Registered office of this
incorporation is: 18791 N.W. 83 Ave.

Miami, Fl 33015

and the name of the Initial Registered of this incorporation
is : ANA ENSENAT

18791 N.W. 83 AVE MIAMI, FL 33015

ARTICLE SIX

INITIAL BOARD OF DIRECTORS

This incorporation shall have initially 1 Directors(s)
The number of Directors may be either increased or decreased
from the time to time by the bylaws but shall never be less
than 1 . The name(s) and address(es) of the initial
Director(s) of this incorporation is(are):

ANA ENSENAT 18791 NW 83 AVE.

President/secretary/treasurer miami fl, 33015

ARTICLE SEVEN

INITIAL SUBSCRIBER

The name and address of the initial Subscriber of these
Article of Incorporation is : ANA ENSENAT
18791 NW 83 AVE. MIAMI, FL 33015

IN WITNESS WHEREOF, the undersigned subscriber has executed
these articles of incorporation this 22 day of march
1995.

Ana Ensenat
Subscriber

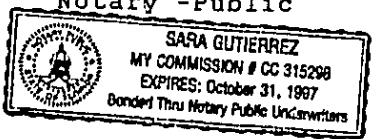
STATE OF FLORIDA)
) SS:
COUNTY OF DADE)

Before me, a Notary Public authorized to take acknowledge-
ment in State and County set forth above, personally
appeared ANA ENSENAT, known to
me and known by me to be the person who executed the fore
going Articles of Incorporation, and he acknowledge before
me that he executed those articles of incorporation.

WITNESS my hand and official seal in the State and County
aforesaid, this 22 days of MARCH, 1995.-

Sara Gutierrez
Notary -Public

Ana Ensenat
Registered Agent



I, ANA ENSENAT, DO HEAR BY UNDERSTAND
THE DUTY BROUGHT BEFORE ME AS A REGISTER AGENT
OF GONZY ENTERPRISES CORP.

I CONSIDER MY SELF CAPABLE AND RESPONSIBLE TO HANDLE
THIS POSITION AND ACHIEVE AN EFFECTIVE ORGANIZATION.
THANK YOU


Register Agent.

FILED
APR 14 1968
STATE OF CALIFORNIA
COUNTY OF LOS ANGELES

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

APPROVED
AND
FILED

1996 SEP 23 PM 2:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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

PROFIT
CORPORATION
ANNUAL REPORT
1996

DOCUMENT # P95000029401 (3)
 1. Corporation Name

GONZY ENTERPRISES CORP.



Principal Place of Business Mailing Address
 18791 NW 83 AVE. 18791 NW 83 AVE.
 MIAMI FL 33015 MIAMI FL 33015

2. Principal Place of Business 2a. Mailing Address
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
 22 City & State 27 City & State
 23 Zip Country 28 Zip Country
 24 25 29 30

3. Date Incorporated or Qualified 04/14/1995 3a. Date of Last Report
 4. FEI Number 65-0547995 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
 8. This Corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No
 10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent
 ENSENAT, ANA
 18791 NW 83 AVE.
 MIAMI FL 33015

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City FL 05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Ana Ensenat* DATE 9/20/96
 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		DELETE
TITLE	DPST	<input type="checkbox"/>
NAME	ENSENAT, ANA	<input type="checkbox"/>
STREET ADDRESS	18791 NW 83 AVE.	<input type="checkbox"/>
CITY-ST-ZIP	MIAMI FL 33015	<input type="checkbox"/>
TITLE		<input type="checkbox"/>
NAME		<input type="checkbox"/>
STREET ADDRESS		<input type="checkbox"/>
CITY-ST-ZIP		<input type="checkbox"/>
TITLE		<input type="checkbox"/>
NAME		<input type="checkbox"/>
STREET ADDRESS		<input type="checkbox"/>
CITY-ST-ZIP		<input type="checkbox"/>
TITLE		<input type="checkbox"/>
NAME		<input type="checkbox"/>
STREET ADDRESS		<input type="checkbox"/>
CITY-ST-ZIP		<input type="checkbox"/>

13.	
1.1 TITLE	
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

REINSTATEMENT

000001977250
 -10/16/96--01072--012
 ****375.00 ****375.00

14. 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 further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if checked, or on an attachment with an address.

SIGNATURE: *Ana Ensenat* DATE 9/20/96
 SIGNATURE AND TYPED OR PRINTED NAME OF BOILING OFFICER OR DIRECTOR

CR2E034 (3/96)