492 W FLAGEER ST STATE OF FLORIDA SUITE 200 409 EAST GAINES STREET MIAMI FL 33135-TALLAHASSEE, FL 32399 CONTACT: RAY STORMONT FAX: (904) 922-4000 PHONE: (305) 541-3694 FAX: (305) 541-3770 (((H95000004290))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A. NAME: KM CORPORATION FAX AUDIT NUMBER: H95000004290 CURRENT STATUS: REQUESTED TIME REQUESTED: 11:08:01 CERTIFICATE OF STATUS: 0 DATE REQUESTED: 04/17/1995 CERTIFIED COPIES: 0 METHOD OF DELIVERY: FAX ACCOUNT NUMBER: 072450003255 NUMBER OF PAGES: 4 ESTIMATED CHARGE: \$70.00 Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document. (((H95000004290))) \*\* ENTER 'M' FOR MENU. \*\* ENTER SELECTION AND (CR): Help F1 Option Manu F2 NUM CAPS Connect: 00:01:

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SECRETARY ON STATE
TALLAHASSEE, FROBIDA

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#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 17, 1995

EMPIRE CORPORATE KIT COMPANY

MIAMI, FL

SUBJECT: KM CORPORATION

REF: W95000008164

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

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name DOES NOT constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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

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Loria Poole Corporate Specialist FAX Aud. #: H95000004290 Letter Number: 095800017771

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



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 18, 1995

EMPIRE CORPORATE KIT COMPANY

MIAMI, FL

SUBJECT: K.M. ENTERPRISES CORP.

REF: 825000008164

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The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name DOES NOT constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

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Loria Poole Corporate Specialist

FAX Aud. #: H95000004290 Letter Number: 595A00017951

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



APR 27

### ARTICLES OF INCORPORATION

#### OE

KHALID INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### ARTICLE I NAME

The name of the corporation shall be:

KHALID INC.

The principal place of business of this corporation shall be: 5845 NE 2nd Ave., Miami Fl 33137

### ARTICLE II NATURE OF BUSINESS

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

### ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is 500 @ \$1.:
authorized to have outstanding at any one time is: FIVE HUNDRED @ \$1.00 (ONE DOLLAR

### ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

Jose Nac, 3899 NW 7th ST., Suite 203 Miami, FL 33126 Phone (305) 541-3980

# ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and directors(s), if any. who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

KHALED MUMARUP, PRASIDENT & SECRETARY

5845 NE 2nd Ave., Miami Fl 33137

# ARTICLE VLINCORPORATOR(S)

The name(s) and street address(cs) of the incorporator(s) to this articles of incorporation is(are):

KHALED MUHARUP, PRESIDENT & SECRETARY 5845 NE 2nd Ave., Miami Fl 33137

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 31 day of March , 1995

> Signature(s) of Incorporator(s) X Khatat, A. M. hum

Jose Nec, 3899 NW 7th ST., Suite 203 Miami, FL 33126 Phone (305) 541-3980

## CERTIFICATE DESIGNATING REGISTERED AGENT/REGISTERED OFFICE

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

1. The name of the corporation is: KHALID INC.	
2. The name and address of the registered agent and office is:	
KHALED MUHARUP	95 SE( TAL
5845 N.E 2nd Ave	FIL APR 27 CHETARY LAHASSE
(P.O. BOX NOT ACCEPTABLE)	
Miami F1 33137	2: 4 STAT LORIE
(CITY/STATE/ZIP)	<del></del>
SIGNATURE X MANGET 4. (Corporate Of	Make 40
TTTLE President	
DATE March 31, 1995	
MAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ALECORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGE THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF LELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.	REE TO ACT IN ALL STATUTES I ACCEPT THE
SIGNATURE X Khulit F. M. (Registered Age	like
(Registered Age	nt)
DATE   March 31, 1995	

Jose Nac, 3899 NW 7th ST., Suite 203 Miami. FL 33126 Phone (305) 541-3980

OI.