# P9500058213

FILED 95 JUL 27 PM 4:00

SECRETALIST STATE
TALLAHASSEE, FLORIDA
SOCIO 1550653
-08/01/95--01067--007
\*\*\*\*122.50

OFFICE USE ONLY

LAZARUS CORPORATE INDUSTRIES, INC.
(Requestor's Name)

890 S.W. 87 AVENUE, SUITE: 16

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

LOCAL REPRESENTATIVE TALLAHASSEE

(904)385-6715

CORPORATION NAME(s)	&	DOCUMENT NUMBER(S) (if known):
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1. Careblean Order	(Document #)
2	(Document #)
(Corporation Name)	(Document #)
(Corporation Nama)	(Document #)
(Corporation Name)	(Document #)
Walk in Pick up time 200	Certified Copy
Mail out Will wait Photocopy	Certificate of Status

	NEW FILINGS	AMENDMENTS		
	Profit	Amendment		
	NonProfit Limited Liability	Resignation of R.A., Officer/Director		
		Change of Registered Agent		
	Domestication	Dissolution/Withdrawal		
	Other	Merger		

395.1305

OTHER FILINGS
Annual Report
Fictitious Name
 Name Reservation

CR2E031(10/92)

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

Examiner's Initials



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

July 26, 1995

LAZARUS

MIAMI, FL

SUBJECT: CARIBBEAN VIDEO CORPORATION

Ref. Number: W95000015055

We have received your document for CARIBBEAN VIDEO CORPORATION and check(s) totaling \$122.50. However, your check(s) and document are being returned for the following:

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.

If you have any questions concerning the filing of your document, please call (904) 487-6903.

Nancy Hendricks Corporate Specialist

Letter Number: 395A00035547

FILED

### **ARTICLES OF INCORPORATION**

95 JUL 27 PH 4: 00

SECRETARO LA STATE TALLAHASSEE, FLORIDA

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

#### ARTICLE I NAME

The name of the corporation shall be: CARIBBEAN VIDEO EXPORT CORPORATION

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:  $8626\ N.W.\ 2.49\ STREET$   $MIAMI, FLORIDA\ 33126$ 

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

WILLIAM E. SANGUINTIN 8624 N.W. DNO STREET MIA NI, FLORIDA 33126

#### ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

WILLIAM SANQUINTIN 8626 N.W. 2ND St. MIAMI, FLA. 33126

The undersigned incorporator(s)	has(have) executed	these Articles of Incorpo	ration this
24th day of_	July	, 19 <u>_95</u> .	
W.Same	quintin) Signature		
	Signature		•
	Signature		-
<del></del>	Signatura		-

Articles of Incorporation Filing Fee - \$35

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURTIJANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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:_	CARIBBEAN	VIDEO	E-X.Port
		CORPORATION		

2. The name and address of the registered agent and office is:

WILLIAM E. SANQUINTIN	
(Name)	95 SE
8626 N.W. 2 NO STREET	
(P.O. Box not acceptable)	27 27 28
MIAMI, FLORIDA	
(City/State/Zip)	OR 4:
	ÖF 8

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

W.Sanquin Lin 07/24/95
USignature) (Date)