

P960000 56080

LAZARUS CORPORATE INDUSTRIES, INC.  
Requestor's Name

890 S.W. 87 AVENUE SUITE 16  
Address

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

LOCAL REPRESENTATIVE TALLAHASSEE

300001880323  
-07/01/96--01032--0005  
\*\*\*\*122.50 \*\*\*\*122.50

Office Use Only

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

1. TRES PYRAMIDES INTERNATIONAL GROUP, INC.  
(Corporation Name) (Document #)

2. Translates: Three Pyramid International Group  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of State

NEW FILINGS	
<input checked="" 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

RECEIVED  
TALLAHASSEE, FLORIDA

96 JUL -2 PM 3:16

DIVISION OF CORPORATION

96 JUL -1 AM 10:58

FILED

RECEIVED

W96-13868



RECEIVED  
JUL 11 -2 PM 2:24  
FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

July 1, 1996

LAZARUS CORPORATE INDUSTRIES, INC.  
890 SW 87 AVE., STE. 16  
MIAMI, FL 33174

SUBJECT: TRES PIRAMIDES INTERNATIONAL GROUP, INC.  
Ref. Number: W96000013868

We have received your document for TRES PIRAMIDES INTERNATIONAL GROUP, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the street address of each officer/director. If the officer/director does not have a street address, list the mailing address and write (N/A).

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) 487-6052.

Sandy Ng  
Document Specialist

Letter Number: 796A00032436

FILED  
26 JUL -2 PM 3:16  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**  
**OF**  
**TRES PIRAMIDES INTERNATIONAL GROUP, INC.**

THE UNDERSIGNED, HAS EXECUTED THE FOLLOWING DOCUMENT AS INCORPORATOR OF THE ABOVE NAMED CORPORATION, A CORPORATION ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, AND ALL RIGHTS, DUTIES AND OBLIGATIONS OF THE UNDERSIGNED AS INCORPORATOR, AND THOSE OF THE CORPORATION, ARE TO BE DETERMINED IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.

**ARTICLE I**

THE NAME OF THIS CORPORATION SHALL BE **TRES PIRAMIDES INTERNATIONAL GROUP, INC.**

**ARTICLE II**

THIS NAME OF THIS CORPORATION SHALL COMMENCE EXISTENCE UPON THE FILING OF THESE ARTICLES OF INCORPORATION BY THE DEPARTMENT OF STATE, STATE OF FLORIDA, AND SHALL HAVE PERPETUAL EXISTENCE.

**ARTICLE III**

THE GENERAL NATURE OF THE BUSINESS AND OBJECTS AND PURPOSES PROPOSED TO BE TRANSACTED AND CARRIED ON BY THIS CORPORATION ARE TO DO ANY AND ALL OF THE THINGS HEREIN MENTIONED, AS FULLY AND TO THE SAME EXTENT AS NATURAL PERSONS MIGHT DO, VIZ:

- 1.- TRANSACT ANY AND ALL LAWFUL BUSINESS.
- 2.- SAID CORPORATION SHALL FURTHER HAVE POWERS: TO HAVE PERPETUAL SUCCESSION BY ITS CORPORATE NAME.

**ARTICLE IV**

THE AGGREGATE NUMBER OF SHARES WHICH THE CORPORATION SHALL HAVE THE AUTHORITY TO ISSUE IS THE TOTAL SUM OF 100 SHARES HAVING A INDIVIDUAL PAR VALUE OF 1,000.-

UNLESS OTHERWISE STARTED IN THESE ARTICLES, OR IN AN AMENDMENT TO THESE ARTICLES, THERE SHALL BE ONLY ONE (1) CLASS OF STOCK OF THIS CORPORATION.

ARTICLE V

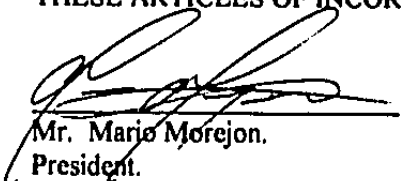
THE STREET ADDRESS OF THE INITIAL PRINCIPAL OFFICE AND THE NAME OF THE INITIAL RESIDENT AGENTS OF THIS CORPORATION SHALL BE MR. MARIO MOREJON, 855 N.W. 36 AV., SUITE 36, MIAMI, FL. 33126.

ARTICLE VI

THE INITIAL BOARD OF DIRECTORS SHALL CONSIST OF A TOTAL TWO (2) PERSONS, AND THE NAME AND ADDRESS OF THE PERSONS WHO IS TO SERVE AS INITIAL DIRECTOR IS MR. MARIO MOREJON, PRESIDENT, MR. MARIO PEREZ, SECRETARY.  
855 N.W. 36 AVE. , SUITE 36, MIAMI, FLORIDA 33126

THE NAME AND ADDRESS OF THE INCORPORATOR EXECUTING THESE ARTICLES OF INCORPORATION IS MR. MARIO MOREJON, 855 N.W. 36 AV. SUITE 36 MIAMI, FLORIDA 33126.

IN WITNEES WHEREOF, THE UNDERSIGNED INCORPORATOR HAS (VE) EXECUTED THESE ARTICLES OF INCORPORATION THIS 26 DAY OF JUNE, 1,996.

  
Mr. Mario Morejon.  
President.

STATE OF FLORIDA )

) SS.

COUNTY OF DADE )

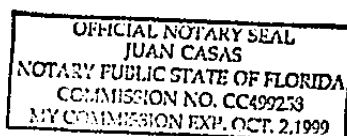
BEFORE ME, A NOTARY PUBLIC AUTHORIZED TO TAKE ACKNOWLEDGEMENTS IN THE STATE AND COUNTY SET FORTH ABOVE, PERSONALLY APPEARED MR. MARIO MOREJON AND MR MARIO PEREZ, KNOWN TO ME AND KNOWN BY ME TO BE THE PERSON WHO EXECUTED THE FOREGOING ARTICLES OF INCORPORATION, AND HE ACKNOWLEDGE BEFORE ME THAT HE EXECUTED THOSE ARTICLES OF INCORPORATION.

IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AFFIXED MY OFFICIAL SEAL IN THE STATE AND COUNTY AFORSAID, THIS 26 DAY OF JUNE, 1,996.

  
Mr. Mario Perez  
Secretary.

  
NOTARY PUBLIC, STATE OF FLORIDA AT LARGE

MY COMMISSION EXPIRES:



**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTIONS 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: TRES PIRAMIDES INTERNATIONAL GROUP, INC.
- 2.- THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

**MARIO MOREJON**  
**855 Northwest 36 AV. SUITE 36**  
**MIAMI, FLORIDA 33126**

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.

SIGNATURE 

DATE 6-26-96

FILED  
9 JUL -2 PM 3:16  
TALLAHASSEE, FLORIDA