

P97000007061

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

Office Use Only

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

1. EXTREME MARINE OFFSHORE GROUP INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_ (Corporation Name) (Document #) 500002064765--2  
-01/22/97 01120-019  
\*\*\*\*\*78.50 \*\*\*\*\*78.50

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

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

☒ Walk in

☒ Pick up time 2:00

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☒ Certificate of Status

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

W97-1585

FILED  
RECEIVED  
97 JAN 24 AM 11:47  
STATE  
TALLAHASSEE FLORIDA



**FLORIDA DEPARTMENT OF STATE**

**Sandra B. Mortham**  
Secretary of State

January 22, 1997

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

**SUBJECT: EXTREME MARINE OFFSHORE GROUP INC**  
Ref. Number: W97000001585

We have received your document for **EXTREME MARINE OFFSHORE GROUP INC** and your check(s) totaling \$78.50. 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).

The registered agent designated must be an active Florida corporation or limited liability company or a foreign corporation or limited liability company authorized to transact business in Florida. Please correct the document accordingly.

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: 697A00003124

**RECEIVED**  
97 JAN 24 AM 11:35  
DIVISION OF CORPORATION

**ARTICLES OF INCORPORATION**  
**OF**

**FILED**  
97 JAN 24 AM 11:47  
SEC. OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE 1-NAME**

The name of the Corporation is  
EXTREME MARINE OFFSHORE GROUP INC.

**ARTICLE 2-PURPOSE OF CORPORATION**

The Corporation shall engage in any activity of business permitted under the laws of the United States and of the State of Florida.

**ARTICLE 3-PRINCIPAL OFFICE**

The address of the principal office of this Corporation is  
2595 SW 87 AVE MIAMI, FLORIDA 33165

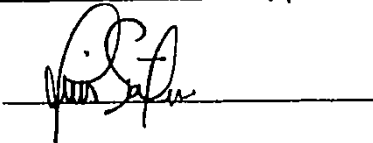
**ARTICLE 4-INCORPORATOR**

The name and street address of the incorporator of this Corporation is:

LUIS DAVID SOTERO  
8320 SW 96 PL MAIMI, FL 33173

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

21 day of JAN, 1997.



Luis D. Sotero

#### **ARTICLE 5- OFFICERS**

The officers of the Corporation shall be:

President: LUIS DAVID SOTERO  
Vice-President:  
Secretary: LUIS DAVID SOTERO  
Treasurer:  
8320 SW 96 Pl. Miami, Fl. 33173

#### **ARTICLE 6-DIRECTOR(S)**

The Director(s) of the Corporation shall be:

CEO LUIS DAVID SOTERO

#### **ARTICLE 7-SHARES**

The number of shares of stock that this Corporation is authorized to have outstanding at any one time is: 100 SHARES AT \$ 1.00 PAR VALUE

#### **ARTICLE 8-REGISTERED OWNERS**

The Corporation, to the extent permitted by law, shall be entitled to treat the person in whose name any share or right is registered on the books of the Corporation as the owner thereof, for all purposes, and except as may be agreed in writing by the Corporation, the Corporation shall not be bound to recognize any equitable or other claim to, or interest in, such share or right on the part of any other person, whether or not the Corporation shall have notice thereof.

#### **ARTICLE 9-EFFECTIVE DATE**

These Articles of Incorporation shall be effective immediately upon approval of the Secretary of State, State of Florida.

#### **ARTICLE 10-AMENDMENT**

The Corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation, or in any amendment hereto, or to add any provision to these Articles of Incorporation or to any amendment hereto, in any manner now or hereafter prescribed or permitted by the provisions of any applicable statute of the State of Florida, and all rights conferred upon shareholders in these Articles of Incorporation or any amendment hereto are granted subject to this reservation.

**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:

**EXTREME MARINE OFFSHORE GROUP INC.**

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

**A & G ACCOUNTING & INCORPORATIONS ENTERPRISES INC.**

**NAME: A & G ACCOUNTING & INCORPORATIONS ENTERPRISES INC.**

**ADDRESS: 2595 SW 87 AVE. MIAMI, FL 33165**

**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

*Guillermo J. [Signature]*  
*January 25, 1997*  
FILED  
JAN 27 4:11 PM '97  
STATE OF FLORIDA