770000011342

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

0000022382**70--9** -07/15/97--01047--015 ******8.75 *****78.75 Office Use Only

CORPORATION	NAME(S) & DOCUMENT N	UMBER(S), (if known):
1. CUSTON	1 WOODWORKI	NG DESIGN, CORP
2(Cor	poration Name)	(Document #)
3(Cor	rporation Name)	(Document #)
4. <u>(Co</u>	rporation Name)	(Document #)
	Pick up time 2,00	
- Man out	I AMENDMENTS	
Profit	Amendment	FILED 97 JUL 15 PM 1: 56 SECKETARY OF STATE TALLAHASSIE, FLORIDA
NonProfit	Resignation of R.A., Officer	/Director
Limited Liability	Change of Registered Agent	28 5 E
Domestication	. Dissolution/Withdrawal	
Other	Merger	
CTHER FILLINGS	PREGISTRATETOYA GUADIEJSAUJON	
Fictitious Name	Foreign	97 97
Name Reservation	Limited Partnership	PECEIVE 97 JUL 15 AHII: DIVISION OF COKPORA
t.	Reinstatement	一 · · · · · · · · · · · · · · · · · · ·
	Trademark	NE SPOR
	Other	- T

K.R. JUL 1 5 1997.

Examiner's Initials

Date JULY 14, 1997

SECRETARIAN SECURITARIAN SECURI

Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

(name of corporation)							
Re	CUSTOM	WOODWORKING	DESIGN,	CORP.	, Inc.		
iliassee, Fl. <i>323</i> 14							

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

(individual's name)
 CUSTOM WOODWORKING DESIGN, CORP
(name of corporation)
 MAILING ADDRESS OF CORPORATION

FLORIDA 33135

PHONE

) 644-3048 Phone Number

MIAMI.

305

ARTICLES OF INCORPORATION

οf

CUSTOM WOODWORKING DESIGN, CORP.

(name of	corporation)
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The undersigned subscriber(s) to these Articles of incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

CUSTOM WOODWORKING DESIGN, CORP.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue <u>FIVE HUNDRED</u> shares (500) of <u>ONE</u>

Dollar(s) (\$ 1.00) par. value Common Stock, which shall be designated "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	JOSE D. LOPEZ				, , , , , , , , , , , , , , , , , , , 	
ADDRESS	2991 S.W. 1st STREET					
CITY	MIAMI	STATE	FLORIDA	ZIP	33135	

The principal office, if known, or the mailing address of the corporation is:

NAME	CUSTOM WOODWORKING DESIGN, CORP.						
ADDRESS	2991 S.W. 1st STREET						
CITY	MIAMI STATE FLORIDA ZIP 33135						

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall be less that none (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	JOSE D. LOPEZ	PRESIDENT				• • • • • • • • • • • • • • • • • • • •
ADDRESS	2991 S.W. 1st STREET					
CITY	MIAMI	STATE	FLORIDA	ZIP	33135	_
NAME			·			
ADDRESS						
CITY		STATE		ZIP		· · · · · · · · · · · · · · · · · · ·
NAME		· · · · · · · · · · · · · · · · · · ·				
ADDRESS						
CITY		STATE		ZIP		

Article VII - INCORPORATORS

			•					follows:
NAME	JOSE D. LO	OPEZ			<u> </u>		 	
ADDRESS	2991 S.W.	1st	STREET					
CITY	MIAMI			STATE	FLORIDA	ZIP	33135	
NAME								
ADDRESS							· · · · · · ·	
CITY	· · · · · · · · · · · · · · · · · · ·			STATE		ZIP		
NAME							****	<u></u> ,
ADDRESS								
CITY	······································			STATE		ZIP		··········
IN WITNESS day of	WHEREOF, the	under	rsigned subso		ecus fis	e Article	s of Incorpor	(Seal)
		-	/_	-)~	<u> </u>	<u></u>	<u>ノ</u>	(Seal)
			•					(Seal)
STATE OF F	7.ORIDA)				
COUNTY O	DADE			SS				
before me, a personally ap	Notary Public at opeared:	, ð	Jose	D. LOPE	FL DL#L120		52-242-0	above,
	Signature	;		_) _		Form of Ide	entification	
	Signature					Form of Ide	ntification	
known to me and i me that of the above name	cnown to be the person HE d person as in	exect	sted these article	s of incomparation	of incorporation, w on, that I relied upon oath was not taken.	the form _	ledged before of identific	ation
NOTATRY F	UDDER STAMP SE	AL] .	Witness my han	1 and official scal in	the County	and State last of	oresald this
JORGI OTARY PUBLIC! COMMISSION	OTARY SEAL BANOS STATE OF FLORID N NO. CC610953 N EXP. JAN. 14,200			14 Notary Signiture	day of JI	ILY Que	19.9	<u>7</u>
		البن		Primed Notary S	JORGE BA	Anos		

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT OF

CUSTOM WOODWORKING DESIGN, CORP.

(name of corporation)

The above corporation, desiring to organize under the laws of the State of Florida its registered office as indicated in the Articles of Incorporation at							
	MIAMI,	FLORIDA	33135				
has na	ımed	JOSE D.	LOPEZ				

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

97 JUL 15 PM 1: 56 SECRETARY OF STATE TALL MASSIE, FLORIDA

FORM 215: CERTIFICATE & ACKNOWLEDGEMENT REGISTERED AGENT

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