

P9700008406

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: FAP ENTERPRISES, INC.  
(Proposed corporate name - must include suffix)

500002246415--5  
-07/24/97--01043--006  
\*\*\*\*131.25 \*\*\*\*131.25

Enclosed is an original and one (1) copy of the articles of incorporation and a check  
for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☒ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM:

HAMID FAROOQI  
Name (printed or typed)

2900 WILCREST # 302  
Address

HOUSTON TX 77042  
City, State & Zip

(713) 977-0488 ext. 14  
Daytime Telephone number

97 AUG -7 AM 11:52  
FILED  
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.



**FLORIDA DEPARTMENT OF STATE**

**Sandra B. Mortham**  
Secretary of State

July 29, 1997

**HAMID FAROOQI**  
2900 WILCREST #302  
HOUSTON, TX 77042

**SUBJECT: FAP ENTERPRISES, INC.**  
Ref. Number: W97000017444

We have received your document for FAP ENTERPRISES, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

**REGISTERED AGENT MUST HAVE ORIGINAL SIGNATURE.**

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 (850) 487-6933.

**Dana Calloway**  
Document Specialist

Letter Number: 497A00038146

ARTICLES OF INCORPORATION  
OF  
FAP ENTERPRISES, INC.

FILED  
97 AUG -7 AM 11:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I

The name of the Corporation is: FAP ENTERPRISES, INC.

ARTICLE II

The period of its duration is perpetual.

ARTICLE III

The principal place of business is 451 E. Altamonte Dr.  
Altamonte Springs, Florida 32701.

The mailing address of the Corporation is 213 Sheriden Ave.  
Longwood, Florida 32750.

ARTICLE IV

The purpose or purposes for which it is organized are: To  
transact any or all lawful business or businesses for which  
Corporation may be incorporated under the Florida Business  
Corporation Act.

ARTICLE V

The aggregate number of shares which the Corporation shall  
have authority to issue is Ten Thousand (10,000) shares of  
common stocks of \$.10 Par Value.

ARTICLE VI

The Corporation will not commence business until it has  
received for the issuance of its shares consideration of  
the value of \$1,000 consisting of money, labor done or  
property actually received.

ARTICLE VII

The address of its registered office is 213 Sheridan Avenue,  
Longwood, Florida 32750. The name of its registered agent at  
such address is AHMED GULAMHUSSAIN.

ARTICLE VIII

The number of the initial directors is one and the name and address of such director is:

AHMED GULAMHUSSAIN

213 SHERIDAN AVENUE  
LONGWOOD, FLORIDA 32750

ARTICLE IX

The under signed incorporator have executed these Articles of incorporation on this 22nd day of July, 1997. The name and the address of the incorporator is:

HAMID FAROOQI

2900 WILCREST #302  
HOUSTON, TEXAS 77042

  
\_\_\_\_\_  
HAMID FAROOQI

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:

FAP ENTERPRISES, INC.

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

AHMED GULAMHUSSAIN  
(NAME)

213 SHERIDEN AVE.

(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

LONGWOOD FLORIDA 32750  
(CITY/STATE/ZIP)

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)

07-31-97

(DATE)

FILED  
AUG - 7 AM 11:53  
TALLAHASSEE, FLORIDA  
CREATED

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314