

4
P97000084136

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

FILED
97 SEP 29 PM 2:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only

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

1. IKAP TRADING, INC. 500002305975--6
(Corporation Name) (Document #)
-09/29/97--01094--014
*****78.75 *****78.75

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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☒ 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

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ARTICLES OF INCORPORATION

OF

IKAP TRADING, INC.

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TALLAHASSEE, FLORIDA

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 607, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I - NAME

The name of the corporation shall be:

IKAP TRADING, INC.

ARTICLE II - PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The principal place of business and the mailing address of this corporation shall be:

3350 N.W. 54TH STREET
MIAMI, FLORIDA 33142

ARTICLE III - PURPOSE

This corporation is organized for the purpose of transacting any and all lawful business.

ARTICLE IV - MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed as follows:

This corporation shall have one (1) Director initially. The number of directors may be increased from time to time by the Bylaws adopted by the stockholders, but shall never be less than (1). If required by the ethnics of the profession, the Directors shall be required to possess the same professional qualifications as shareholders are required to possess.

ARTICLE V -

The aggregate number of shares which this corporation shall have authorized to issue is the total of 500 SHARES

ARTICLE VI - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and street address of the initial registered agent is:

ELSA CHIOTIS

3350 N.W. 54TH STREET
MIAMI, FLORIDA 33142

ARTICLE VII - INCORPORATORS

The name(s) and street address(es) of the incorporator(s) for these Article of Incorporation (are):

ELSA CHIOTIS

3350 N.W. 54TH STREET
MIAMI, FLORIDA 33142

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this _____, day of _____, 19____.

Signature(s) of the Incorporator(s)



ELSA CHIOTIS

Type name of incorporator signing

Type name of incorporator signing

Type name of incorporator signing

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of the section 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: IKAP TRADING, INC.
2. The name and address of the registered agent and office is:
ELSA CHIOTIS
(NAME)
3350 N.W. 54TH STREET
(P.O. BOX NOT ACCEPTABLE)
MIAMI, FL. 33142
(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. IF 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

Elsa Chiotis

DATE 9 - 8 - 97

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