

# PA 7000089230

**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. PESCANOVA U.S.A. INC.  
 (Corporation Name) (Document #)

2. \_\_\_\_\_  
 (Corporation Name) (Document #) 900002321799--6

3. \_\_\_\_\_  
 (Corporation Name) (Document #) -10/16/97--01052--025  
\*\*\*\*122.50 \*\*\*\*122.50

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

FILED  
 RECEIVED  
 97 OCT 16 PM 12:40  
 97 OCT 16 AM 11:12  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
 DIVISION OF CORPORATION

Examiner's Initials 8/10/16/97

ARTICLES OF INCORPORATION

FILED  
97 OCT 16 PM 12:41  
SEC. STATE  
TALL: FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

PESCANOVA U.S.A. Inc.

ARTICLE II PRINCIPAL OFFICE

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

P.O. Box 1185  
MIAMI FL 33149

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 shares.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Aoza Abbad.  
798 CRANFORD Blvd Suite 24  
KEY BISCAYNE FL 33149.

**ARTICLE V INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Jose Abbad  
P.O. Box 1185  
Miami FL 33149

**ARTICLE VI DIRECTOR(S)**

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

P.O. Box  
1185.

Jose Abbad President  
Jose Abbad V. P.  
Jose Abbad Secretary.  
Jose Abbad Treasury.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 15 day of October, 1992.

Signature  
Signature  
Signature

Articles of Incorporation  
Filing Fee - \$35

**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: PESCANOVA U.S.A. INC.

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

Jose Abbad  
(NAME)  
798 CRANDON Blvd Suite 24  
(P.O. BOX NOT ACCEPTABLE)  
Key Biscayne FL 33149.  
(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 \_\_\_\_\_

DATE \_\_\_\_\_

10-15-97

REGISTERED AGENT FILING FEE: \$35.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

97 OCT 16 PM 12:41

FILED