

P980000 5/028

Prayed Fares
Requestor's Name
6855 NW 15 Avenue
Address
Miami, FL 33147
City/State/Zip Phone #

500002549015-7
-05/05/98-01075-005
****122.50 ****122.50

Office Use Only

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

1. _____ (Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

- Walk in Pick up time _____ Certified Copy
 Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
Profit	
NonProfit	
Limited Liability	
Domestication	
Other	

AMENDMENTS	
Amendment	
Resignation of R.A., Officer/ Director	
Change of Registered Agent	
Dissolution/Withdrawal	
Merger	

OTHER FILINGS	
Annual Report	
Fictitious Name	
Name Reservation	

REGISTRATION/ QUALIFICATION	
Foreign	
Limited Partnership	
Reinstatement	
Trademark	
Other	

APPROVED
AND
FILED
98 JUN - 8 PM 1:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BROCK JUN 8 1998

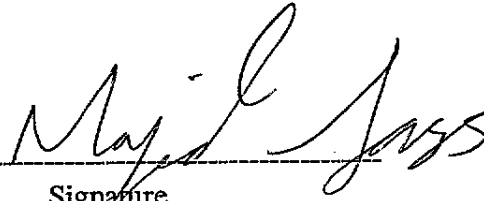
Examiner's Initials	
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ARTICLE V INCORPORATOR(S)

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

Majed Fares 6855 NW 15 Avenue Miami Fl 33147

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 4th day of January, 1998.



Signature

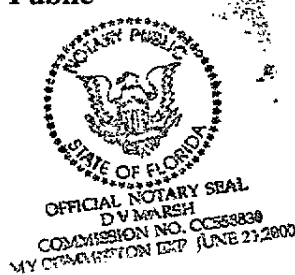
Signature

Signature

Sworn to and subscribed to me this 4th day of January, 1998



Notary Public



**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: **BELADI CORP.**

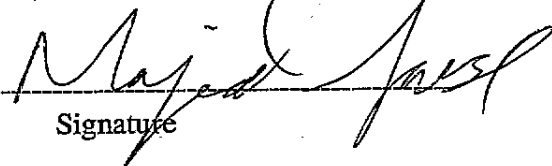
2. The name and address of the registered agent and office is:

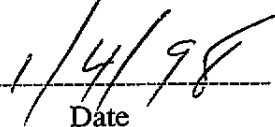
Majed Fares

6855 NW 15th Avenue

Miami, Fl 33147

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 and accept the obligations of my position as registered agent.


Signature


Date

98 JUN -8 PM 1:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
FILED