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Florida Department of State  
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To: Division of Corporations  
Fax Number : (850) 922-4001

From:  
Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**FLORIDA PROFIT CORPORATION OR P.A.**

**GRIAL PROMOCIONES, INC.**  
GRIAL PROMOTIONS, INC.

Certificate of Status	0
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Page Count	04
Estimated Charge	\$78.75

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**FLORIDA DEPARTMENT OF STATE**  
**Sandra B. Mortham**  
Secretary of State

November 23, 1998

FAS-T CORP AGENTS INC

SUBJECT: GRIAL PROMOCIONES , INC.  
REF: W98000026283

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Freida Chesser  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**

**OF**

**GRIAL PROMOCIONES, INC.**

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

**ARTICLE I**

The name of the corporation shall be:

**GRIAL PROMOCIONES, INC.**

**ARTICLE II**

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

**ARTICLE III**

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things therein mentioned, as fully and to the same extent as natural persons might do, viz:

PREPARED: ANA DALMAU ARES  
3636 S.W. 87<sup>TH</sup> AVENUE  
MIAMI FL. 33155  
(305) 448-2072

- (1) Transact any and all lawful business,
- (2) Said corporation shall further have power:

To have perpetual succession by its corporate name,

**GRIAL PROMOCIONES, INC.**

**ARTICLE IV**

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$10.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

**ARTICLE V**

The street address of the initial registered office and the name of the initial Resident

Agent of this corporation shall be:

**MARDELY DELGADO  
7376 S.W. 113 CIR. PLACE  
MIAMI, FLORIDA 33173-2610**

The principal office shall be:

**7376 S.W. 113 CIR. PLACE  
MIAMI, FLORIDA 33173-2610**

**ARTICLE VI**

The initial Board of Directors shall consist of a total of (3) persons, and the names and addresses are:

<b>NELSON RIVERA</b>	<b>PRESIDENT</b>	<b>33%</b>
<b>CALLE LOS CHAGUARAMOS QTA. SUEZ</b>		
<b>ALTA FLORIDA CARACAS - VENEZUELA</b>		

MARIELA PEREIRA  
CALLE LOS CHAGUARAMOS QTA. SUEZ  
ALTA FLORIDA - CARACAS-VENEZUELA

GRAPHIC EDITORIAL 33Z

NILMA FERNANDEZ  
AVE. PRINCIPAL DE STA. INES QTA. LAS ENAS  
CARACAS 1080 VENZUELA

FINANCE DIRECTOR 33Z

The name and address of the incorporate executing these Articles of Incorporation is:

MARDELY DELGADO  
7376 S.W. 113 CIR. PLACE  
MIAMI FL. 33173-2610

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation, this 18<sup>th</sup> day of NOVEMBER, 1998.

  
MARDELY DELGADO

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

Pursuant to the provision 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:

**GRIAL PROMOCIONES, INC.**

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

**MARDELY DELGADO  
7376 S.W. 113 CIR. PLACE  
MIAMI FLORIDA 33173-2610**

**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 POSITIONS AS REGISTERED AGENT.**

SIGNATURE

*M. Delgado*

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