

P99000022948

**CYBERWAVE, INC.**  
2905 Sharp Road  
Kissimmee, FL 34744  
407-846-8786

March 5, 1999

700002798027--8  
-03/08/99--01121--006  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Department of State  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

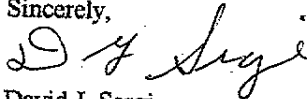
SUBJECT: *CYBERWAVE, INC.*

Enclosed is an original and one (1) copy of the Articles of Incorporation and check in the amount of \$78.75 for the filing fee and Certificate of the Articles of Incorporation for *CYBERWAVE, INC.*

From: David J. Sergi  
2905 Sharp Rd.  
Kissimmee, FL 34744

Also enclosed is a pre-paid Express Mail Return Envelope; please return documents to me via Express.  
Thank you.

Sincerely,



David J. Sergi

Enc.

**FILED**  
99 MAR -8 AM 10:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SD 3/12

# ARTICLES OF INCORPORATION

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

## ARTICLE I NAME

The name of the corporation shall be:

**CYBER WAVE, INC.**

## ARTICLE II PRINCIPAL OFFICE

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

**2905 Sharp Road  
Kissimmee, Florida 34744**

## ARTICLE III SHARES

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

**100**

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

**David J. Sergi  
2905 Sharp Road  
Kissimmee, FL 34744**

## ARTICLE V INCORPORATOR

**David J. Sergi  
2905 Sharp Road  
Kissimmee, FL 34744**



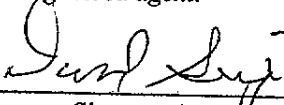
Signature/Incorporator

3-5-99

Date

(An additional article must be added if an effective date is requested.)

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/Registered Agent

3-5-99

Date

FILED  
99 MAR -8 AM 10:50  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE