

P99000081040

TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

200002980312--7
-09/08/99--01022--010
*****78.75 *****78.75

SUBJECT: Andros Video Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original copy and one (1) copy of the articles of incorporation and a check for:

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.23
Filing Fee
Certified Copy,
& Certificate

ADDITIONAL COPY REQUIRED

FROM: E. Charles Pike
Name (Printed or Typed)
11599 Okeechobee Blvd.
Address
Royal Palm Beach
City, State & Zip
(561) 791-0282
Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 SEP - 7 PM 6:07

FILED

NOTE: Please provide the original and one copy of the articles

T BROWN SEP 13 1999

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 article shall be:

Andros Video Inc.

ARTICLE II PRINCIPAL OFFICE

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

11599 Okeechobee Blvd
Royal Palm Beach, Fl 33411

ARTICLE III SHARES

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

2,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

E. Charles Pike
11599 Okeechobee Blvd
Royal Palm Beach, Fl 33411

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

E. Charles Pike
11599 Okeechobee Blvd
Royal Palm Beach, Fl 33411



Signature/Incorporator

8-23-99

Date

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

8-23-99

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA