

# GUERNICA & GONZALEZ

CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS  
A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS

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October 4, 1999

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

500003008555--4  
-10/07/99-01059--011  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

**SUBJECT:** Virtual Graphics, Inc.

Ladies & Gentlemen:

Enclosed is an original and one (1) copy of the articles of incorporation of Virtual Graphics, Inc., as well as, a check for \$ 70 covering the filing fee.

Please process and forward all resulting documentation to our office.

Sincerely,



Eduardo S. Gonzalez  
for the firm

EFFECTIVE DATE

10-4-99

FILED  
99 OCT -7 AM 7:40  
SECRET  
TALLAHASSEE FLORIDA

CB  
10-12-99  
2

## 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:

VIRTUAL GRAPHICS, INC.

### ARTICLE II      PRINCIPAL OFFICE

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

104 S. LAUREL DR.  
MARGATE, FLORIDA 33063

### ARTICLE III      SHARES

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

1,000

### ARTICLE IV      INITIAL REGISTERED AGENT AND STREET ADDRESS

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

SAMUEL HENRIQUEZ  
104 S. LAUREL DR.  
MARGATE, FLORIDA 33063

### ARTICLE V      INCORPORATOR


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

SAMUEL HENRIQUEZ  
104 S. LAUREL DR.  
MARGATE, FLORIDA 33063

### ARTICLE VI      EFFECTIVE DATE

The effective date of this corporation will be:

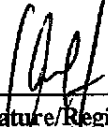
~~OCTOBER 4~~  
~~SEPTEMBER 27, 1999~~

x   
Signature/Incorporator

x 10/24/99

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.

x   
Signature/Registered Agent

x 10/24/99

Date

EFFECTIVE DATE  
10-4-99  
FILED  
OCT -7 AM 7:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA