

# P09000008533

Florida Department of State  
Division of Corporations  
Public Access System

### Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H09000019218 3)))



H090000192183ABC/

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.**  
Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

RECEIVED  
DEPARTMENT OF STATE  
09 JAN 27 PM 3:52

## FLORIDA PROFIT/NON PROFIT CORPORATION

ANMA COMMUNICATION, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 JAN 27 P 12:02

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

68-82-1  
2009

H09000019218

**ARTICLES OF INCORPORATION**

**OF**

**ANMA COMMUNICATION, INC.**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

**FILED**  
2009 JAN 27 P 12:02  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**ARTICLE I NAME**

The name of the corporation shall be: **ANMA COMMUNICATION, INC.**

The principal place of business of this corporation shall be:

**7750 N.W. 103<sup>RD</sup> STREET  
HIALSAH GARDENS, FLORIDA 33016**

**ARTICLE II NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

**ARTICLE III CAPITAL STOCK**

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: **100 SHARES AT 1.00 PAR VALUE.**

**ARTICLE IV TERM OF EXISTENCE**

This corporation is to exist perpetually:

**PREPARED BY: ALFONSO RODRIGUEZ, C.P.A.  
6780 CORAL WAY SUITE 100  
MIAMI, FLORIDA 33155  
TEL: 305-662-1624  
FAX: 305-662-1463**

H09000019218

**ARTICLE V OFFICERS DIRECTORS**

The name(s) and street address(es) of the initial officer(s) and director(s) , if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

**DIOSSELINA MURILLO VARGAS PRES./SECT.**  
3510 ACCON ST.  
TAMPA, FL. 33619

**FELISA MURILLO V.P./TREAS.**  
1130 SW. 103 CT.  
MIAMI, FL. 33186

**ARTICLE VI INCORPORATOR(S)**


The name(s) and street address(es) of the incorporator(s) to this articles of Incorporation is (are):

**DIOSSELINA MURILLO VARGAS**  
3510 ACCON ST.  
TAMPA, FL. 33619

**FELISA MURILLO**  
1130 SW. 103 CT.  
MIAMI, FL. 33186

WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation THIS 16TH DAY OF JANUARY 2009.

Signature(s) of Incorporator(s)



\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

H09000019218

**CERTIFICATE OF DESIGNATION**

**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, 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:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 JAN 27 P 12:02

FILED

1. The name of the corporation is: **ANMA COMMUNICATION, INC**
2. The name and address of the registered agent and Office

**FELISA MURILLO**  
1130 SW. 103 CT.  
MIAMI, FL. 33186

Signature: \_\_\_\_\_

*[Handwritten Signature]*  
\_\_\_\_\_  
(Corporate officer)  
**FELISA MURILLO**

Title: V.P./TREAS.

Date: JANUARY 15, 2009

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE \_\_\_\_\_

*[Handwritten Signature]*  
\_\_\_\_\_  
**FELISA MURILLO**

DATE: 1/15/09

**REGISTERED AGENT FILING FEE:**

812610000604