

P03000042231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100015461171

04/11/03--01040--012 \*\*70.00

04/11/03--01040--013 \*\*8.75

FILED  
2003 APR 11 PM 2:18  
TALLAHASSEE FLORIDA

4/15/03

TRANSMITTAL LETTER

FILED

2003 APR 11 PM 2:18

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

SUBJECT: HABIA INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

\$70.00  
Filing Fee

\$78.75 \*  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

\* 2 Money  
orders :  
70.- +  
8.75  
enclosed.

FROM: RAQUEL HERMIDA

Name (Printed or typed)

317 AND A HALF 21ST AVENUE SOUTH

Address

ST PETERSBURG, FL 33705

City, State & Zip

727-553 9114

Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**FILED**  
2003 APR 11 PM 2:18  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

HABIA INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

317 AND A HALF 21ST AVENUE SOUTH, ST PETERSBURG, FL  
33705

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

PROFESSIONAL PURPOSE

**ARTICLE IV SHARES**

The number of shares of stock is:

5000 NO PAR VALUE

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

NIGEL MAROZHE, 317 AND A HALF 21ST AVE SO., ST PETERSBURG, FL 33705  
PRESIDENT  
RAQUEL HERMIDA, 317 AND A HALF 21ST AVE S., ST PETERSBURG, FL 33705  
TREASURER

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:


NIGEL MAROZHE, 317 AND A HALF 21ST AVE SO., ST PETERSBURG, FL 33705

**ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

RAQUEL HERMIDA, 317 AND A HALF 21ST AVE SO., ST PETERSBURG, FL 33705

\*\*\*\*\*  
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent

*Nigel Marozhe*  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

*Raquel Hermida*  
\_\_\_\_\_  
Date