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To: Division of Corporations  
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From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
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**FLORIDA PROFIT CORPORATION OR P.A.**

**ENMANUEL KITCHEN CABINET, INC.**

Certificate of Status	0
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ARTICLES OF INCORPORATION  
OF

ENMANUEL KITCHEN CABINET, INC.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) Competent to contract, hereby form a corporation under the laws of State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is: ENMANUEL KITCHEN CABINET, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue One hundred shares (100) of five Dollar (s) (\$ 5.00 ) par value common stock, which shall be designated "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and name of the at office is:

NAME	VICTOR M. DIAZ			
ADDRESS	653 W 27 ST			
CITY	HIALEAH	STATE	FL	ZIP 33010

The principal office, if known or the mailing address of the corporation is:

NAME	VICTOR M. DIAZ			
ADDRESS	653 W 27 ST			
CITY	HIALEAH	STATE	FL	ZIP 33010

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) director initially. The number of directors may be either increased or diminished from time to time by - laws, but shall never be less than one (1).

NAME	VICTOR M. DIAZ		
ADDRESS	3320 NW 101 ST		
CITY	MIAMI	STATE	FLORIDA ZIP 33147
NAME	DORKA SILVA		
ADDRESS	3320 NW 101 ST		
CITY	MIAMI	STATE	FLORIDA ZIP 33147
NAME			
ADDRESS			
CITY		STATE	FLORIDA ZIP
NAME			
ADDRESS			
CITY		STATE	FLORIDA ZIP
NAME			
ADDRESS			
CITY		STATE	FLORIDA ZIP

ARTICLE VII - INCORPORATORS

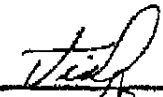

The name and addresses of the incorporators signing these Articles of Incorporation are as follows :

NAME	VICTOR M. DIAZ		
ADDRESS	3320 NW 101 ST		
CITY	MIAMI	STATE	FLORIDA ZIP 33147
NAME	DORKA SILVA		
ADDRESS	3320 NW 101 ST		
CITY	MIAMI	STATE	FLORIDA ZIP 33147
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHERE OF, the undersigned subscriber (s) have executed these Articles of Incorporation this 26<sup>TH</sup> day of September, 2003.

PREPARED: SOSA ACCOUNTING TAX SERVICE  
 570 EAST 49 STREET  
 HIALEAH, FL 33013

(305) 688 - 1716  
 (305) 688 - 1714

 \_\_\_\_\_ (Seal)  
 \_\_\_\_\_ (Seal)  
 \_\_\_\_\_ (Seal)  
 \_\_\_\_\_ (Seal)  
 \_\_\_\_\_ (Seal)

**CERTIFICATE AND ACKNOWLEDGEMENT  
OF REGISTERED AGENT**

**CERTIFICATE OF REGISTERED AGENT**

OF

**ENMANUEL KITCHEN CABINET, INC.**

(name of corporation)

Pursuant to Statutes Sections 48.091 and 607.0501, the following is submitted:  
The above corporation, to organize under the laws of the State of Florida with its  
registered office as indicated in the Articles of Incorporation.

AT: 653 W 27 ST

MIAMI, FL 33010

Has named VICTOR M. DIAZ

Located at the aforesaid address, as its Registered Agent to accept service of process  
within this state.

**ACKNOWLEDGEMENT**

Having been named as Registered Agent to accept service of process for the above state  
corporation at the place designated in this certificate, and being familiar with the  
obligations of that position, I hereby accept to act in this capacity, and agree to comply  
with provisions of Florida Law in keeping open said office.

  
\_\_\_\_\_  
(registered agent)

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