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FLORIDA PROFIT CORPORATION OR P.A.

The Corner Muse Inc.

Certificate of Status	1
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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

The Corner Muse Inc.

ARTICLE II PRINCIPAL OFFICE

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

The Corner Muse Inc.

210 NE 18th Street Miami, FL 33137

ARTICLE III SHARES

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

1,000 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Manuel Antonio Iraola 517 Cadagua Avenue Coral Gables, FL 33146

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940



ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Manuel Antonio Iraola-517 Cadagua Avenue, Coral Gables, FL 33146- President Mark Scharnitz-517 Cadagua Avenue, Coral Gables, FL 33146- Vice President

ARTICLES VI INCORPORATOR(S)

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

Manuel Antonio Iraola-517 Cadagua Avenue, Coral Gables, FL 33146 Mark Scharnitz-517 Cadagua Avenue, Coral Gables, FL 33146

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

13th day of May 2004.

Manuel Antonio Iraola-Signature

Mark Scharmeter
Mark Scharnitz-Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	The Corner Muse Inc.	
2. The name and address of the register	red agent and office is:	
	Manuel Antonio Iraola	2004 MAY
	Name	HA
	517 Cadagua Avenue	17
	(P.O. Box or Mail Drop Box NOT Acceptable)	me B
	Coral Gables, FL 33146 (City / State / Zip)	10: 07 STATE STORIDA

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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Manuel Antonio Iraola (Date)

SIGNATURE

May 13, 2004

(Date)