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HOWARD E. KURZWEIL, P.A.
UNION PLANTERS BANK BUILDING
2151 LE JEUNE ROAD, MEZZANINE
CORAL GABLES, FLORIDA 33134

HOWARD E. KURZWEIL

TELEPHONE (305) 442-7085
FAX (305) 461-2316

November 9, 1999

Secretary of State
Division of Corporations
Corporate Records Bureau
P.O. Box 6327
Tallahassee, Florida 32301

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-11/12/99--01047--007
*****87.50 *****87.50

    Re: **Deal Developers, Inc.**

Dear Sir or Madam:

    Enclosed herewith is the original and one (1) copy of the Articles of Dissolution of the above-named Florida corporation.

    Also enclosed is a check in the amount of $87.50 representing payment of the following:

          Filing Fee   35.00
          Certified Copy   52.50

    Kindly return a certified copy of the above-listed Articles of Dissolution as filed to the undersigned at your earliest convenience.

    Thank you for your prompt attention to this matter.

                                    Very truly yours,

                                    [signature]

                                    Howard E. Kurzweil, Esq.

HEK/ld
Enclosure
C:\MyFiles\corporate\DealDevelArticl.ltr.wpd

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Dissolution
LFT 11-18-99

Articles of Dissolution

Pursuant to the provisions of Florida Statutes Section 607.1403, Articles of Dissolution shall be filed with the Department of State as follows;

1. Name of Corporation:

    Deal Developers, Inc.

2. Date dissolution was authorized:

    December 1, 1998

3. Dissolution was approved by the Shareholders and the number of votes cast for dissolution satisfied the requirements of Florida Statutes Section 607.1402(5).
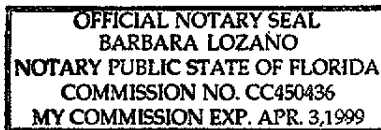
                                    Deal Developers, Inc.

                                    By: _____
                                        Suetelle Kurzweil

STATE OF Florida   }
                           :SS
COUNTY OF Dade   }

        The foregoing Articles of Dissolution were acknowledged before me this 8th day of __January__,
1999, by Suetelle Kurzweil, as President of Deal Developers, Inc. who is (X) personally known to me or (_____)
has produced _____ as identification.

My Commission Expires:

                                    _____
                                    Notary Public, State of Florida at Large
┌─────────────────────────────┐   Barbara Lozano
│   OFFICIAL NOTARY SEAL   │   _____
│   BARBARA LOZANO   │   Typed or Printed Name of Notary Public
│ NOTARY PUBLIC STATE OF FLORIDA│
│ COMMISSION NO. CC450436   │
│ MY COMMISSION EXP. APR. 3,1999│
└─────────────────────────────┘

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