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To:

Division of Corporations

Fax Number

: (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335

: (305)599-0839

Fax Number

: (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

ESPERANZA SKIN CARE INC.

Certificate of Status	O
Certified Copy	. 1
Page Count	1
	03
Estimated Charge	\$78.75

9/30/02 3:35 PM



ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpuse 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:

Esperanza Skin Care Inc.

ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:

801 West 49 St. Hialeah Fl. 33012.

Suite 232.

ARTICLE III SHARES

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

100 Shares @ 100 par Value.

ARTICLE IV . INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

Esperanza Diaz.

801 West 49 St. Hialeh Fl. 33012 Suite #232.

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Esperanza Diaz.

801 West 49 St. #232.

Hialeah Fl. 33012.

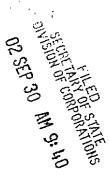
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

27 Septtlembre 2002.

(An additional article must be added if an effective date is requested.)

Simatur

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 DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	Esperanza Skin Care Inc.
-	
2. The name and address of the registe	red agent and office is:
Esperanza D	iaz.
	(NAME)
801 West 49	St. #232 Hialeah Fl. 33012
(P.O. Box	or Mail Drop Box NOT ACCEPTABLE)
Hialeah-Fl.	
 	(CITY/STATE/ZIP)

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

Eperanza Dioz (SIGNATURE)	. 09 27 2002 (DATE)
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